

Joint Strategic Needs Assessment

What we know about Special Educational Needs and/or Disabilities (SEND) in Sefton

“A profile of the Sefton children and young people with special educational needs and/or disabilities.”

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Contents

Introduction	5	Map 1. Sefton SEN cohort, including EHCP and SEN Support (count by LSOA).....	18
Sefton School and Pupil Numbers	6	Map 2. Sefton SEND cohort with an EHCP (count by LSOA) ...	18
Table 1. School and Children Numbers.....	7	Map 3. Sefton SEND cohort receiving SEN Support (count by LSOA).....	18
Sefton validated SEN statistics for 2018.....	7	Map 4. Sefton SEND cohort receiving High Needs Funding (count by LSOA).....	19
Table 2. Number of children and young people with special educational needs	7	Sefton School SEN population educational outcomes	19
Number of Sefton children and young people with an EHC plan. ..8		Chart 16. 2018/19 High Needs Funding in Sefton	20
Chart 1. Children and young people with a Sefton maintained EHC plan by age groups.....	8	Sefton local SEN statistics (2019)	21
Placement of children and young people with a Sefton maintained EHC plan	8	Chart 17. Children and young people with an EHC plan (April 2019).	21
Nationally 47.9% of Children and Young People with an EHC Plan attend a mainstream school. There is a national increase in pupils attending special schools, reasons for this were identified by the National Audit Office as;	8	Equality & Diversity	21
Table 3. Children and young people for whom Sefton maintains an EHC plan.....	8	Chart 18. Children and young people with an EHC plan (Gender).....	21
Table 4. Number of children and young people for whom the authority maintains a statement of SEN or EHC plan by placement (2019 SEN2 return)	10	Chart 19. Children and young people with an EHC plan (Ethnicity)	21
Chart 3. Primary Need of SEN Pupils in Sefton Primary Schools	11	Specialist Transport	22
Chart 4. Primary Need of SEN Pupils in Sefton Primary Schools	12	Chart 20. Children and young people with an EHC plan (Specialist Transport Provision).....	22
Chart 5. Primary Need of SEN Pupils in Sefton Special Schools	13	Sefton Aim Higher	22
Number of EHC Assessments.....	14	Short Breaks in Residential Unit (Springbrook).....	23
Chart 6. Number of children and young people for whom an EHC plan was made for the first time during 2018	14	Qualitative Evaluation of Sefton’s SEND Provision.....	23
Sefton SEN statistical trends	14	Community Health Activity and Average Waiting Times.....	24
Number of School pupils receiving SEN Support (2014 - 2018) ...14		South Sefton Activity and Average Waiting Times	24
Chart 10. Pupils Receiving SEN Support.....	14	Southport & Formby Activity and Average Waiting Times	24
Children & Young People with a Sefton Maintained EHC Plan (2014 - 2018)	15	Paediatric Speech and Language Therapy (SALT)	25
Chart 11. Children and young people with a SEN Statement or EHC plan	15	Paediatric Dietetics	25
Number of SEN Statements & EHC Plans issued by Sefton (2014 - 2018).....	15	Dietetics DNAs & Cancellations.....	26
Chart 12. Number of children and young people with a new statement or EHC plan by calendar year	15	Paediatric Continence	26
Percentage of new EHC Plans issued within 20 weeks (2014 - 2018).....	16	Occupational Therapy	26
Chart 13. Percentage of new EHCP issued within 20 weeks...16		Children’s Wheelchair Services	26
SEN Appeals.....	16	Paediatric Community Audiology Services – Contacts and Average Waits	27
Reported expenditure on SEN (2014 - 2018)	16	South Sefton CCG.....	27
Chart 14. Reported Expenditure (SEN - S251 outturn)	16	27
Table 5. 2018/19 High Needs Funding in Sefton	17	Southport & Formby CCG	27
Chart 15. 2018/19 High Needs Funding in Sefton.....	17	27
Sefton SEND Cohort by Locality.....	18	Child and Adolescent Mental Health Services	27
		Eating Disorders – South Sefton CCG	27
		Eating Disorders – Southport & Formby CCG.....	27
		South Sefton CCG CAMHS Referrals	28
		Waiting Times - Referral to Assessment	28
		Waiting Times – Assessment to Intervention.....	28
		Southport & Formby CCG CAMHS Referrals	29
		Referrals	29
		Waiting Times - Referral to Assessment	29
		Waiting Times – Assessment to Intervention.....	29
		Summary.....	30
		Data Appendix.....	33

Demographics33

- Table 1. Sefton 2018 Mid-year Population Estimates by 5-Year Age Groups33
- Table 2. Sefton 2018 Mid-year Population Estimates by 5-Year Age Groups33
- Figure 1. Sefton Population Pyramid and 2041 Projections....33
- Table 3. Sefton 2016 Based Population Projections by 5-Year Age Groups34
- Table 4. Sefton 2016 Based Population Projections by Child-level Age Cohorts.....34
- Table 5. Sefton 2017 Based Small Area Population Estimates by 5-Year Age Groups34
- Table 6. Sefton 2017 Based Small Area Population Estimates by 5-Year Age Groups34

Introduction

Sefton is committed to meeting the needs of children and young people with special educational needs and/or disabilities (SEND) living within the borough. The development of this Joint Strategic Needs Assessment (JSNA) will help to understand and identify the needs of this population and build them into local commissioning plans.

Support for children and young people with special educational needs and/or disabilities (SEND) has undergone radical reform. The Children and Families Act 2014 extends the SEND system from birth to 25; replacing statements of special educational need with a new birth-to-25 Education Health and Care plan (EHCP); broadening the definition of special educational needs and/or disabilities (SEND) to include any disability including mental health; and, offers personal budgets to those families with children affected by SEND.

The Act puts children, young people, parents and carers at the centre of the process. Partners in the local system are required to make available and easily accessible, the full range of information and support in the Local Offer. A key feature of the Act is that health, (locally this is Sefton's two Clinical Commissioning Group (CCG), and NHS England), are required to make joint commissioning arrangements to secure Education, Health and Care provision for children and young people for whom the authority is responsible for as well as those who have special educational needs.

The Special Educational Needs and Disability Code of Practice (SEND Code of Practice 2014) requires Health and Wellbeing Boards to consider the needs of vulnerable groups, including those with special educational needs and disabled children and young people, those needing palliative care and looked after children. To ensure that the reforms are implemented successfully the Department for Education introduced a new SEND Ofsted and Care Quality Commission (CQC) Inspection Framework for Local Areas. An up-to-date JSNA is a mandated part of the Ofsted and CQC measurement framework. As a result, Ofsted and CQC have chosen to assess the strength of arrangements in local areas, rather than the

contribution of individual agencies, against 3 broad strands:

1. What we know about children and young people with special educational needs and/or disabilities (SEND), including risk factors for SEND and vulnerable groups? (Systems to identify need)
2. What are the key services within the local offer and how do they work together? (Assessing and meeting needs)
3. How effective is the local area in improving outcomes for children and young people who have special educational needs and/or disabilities (SEND)? (Outcomes achieved).

This JSNA looks at all the evidence available for children and young people with special needs and/or disabilities within Sefton Council and all health partners, combined with nationally published statistics and research materials, focussing on prevalence and trends. It explores the characteristics of the children and young people and discusses the factors which can lead to a child having special educational needs and/or disabilities.

The Code of Practice sets out the relationship between population needs, what is procured for children and young people with special educational needs and/or disabilities (SEND), and individual EHC plans (see Figure 1).

Figure 1 JSNA Process, SEND Code of Practice.
Source: SEND code of practice, Department for Education/Department of Health (June 2014)



In line with guidance from the SEND Code of Practice, the Sefton SEND Joint Strategic Needs Assessment (JSNA) is how the Health and Wellbeing Board, SEND Continuous Improvement

Board and other decision makers understand and agree the needs of all local people.

The JSNA considers the needs of the local community, including specific analysis of the needs of vulnerable groups including disabled children and young people and those with special educational needs and/or disabilities (SEND), those with life limiting conditions and looked after children. Local partners across education, health and social care work together to establish what targeted commissioning is needed to address the needs identified.

The JSNA helps to inform the joint commissioning decisions made for children and young people with special educational needs and/or disabilities (SEND), which will in turn be reflected in the services set out in the Local Offer. Emerging themes from recent consultation in localities across the borough illustrate that the following are areas that parents and/or professionals have identified as areas for consideration.

The JSNA represents an accurate picture of known data and information available at the time of publishing.

Definition and Scope

The following definitions are summarised from the SEND Code of Practice 2014.

Special educational needs (SEN)

- A child or young person has SEN if they have a learning difficulty or disability that means they need special educational provision or support to help them learn.
- This means they have a significantly greater difficulty in learning than most of their peers, or they are not able to use the universal provision available within their school because of their disability.
- The term 'SEN' applies across ages 0–25, although the term 'learning difficulties and disabilities' (LDD) is often used post 16 through to adult services.

Disability

- Under the Equality Act 2010, a disability is defined as a physical or mental impairment which has a long-term and substantial adverse

effect on their ability to carry out normal day-to-day activities.

- The definition includes sensory impairments and long-term conditions such as asthma, diabetes, epilepsy and cancer.
- Children and young people with disabilities do not necessarily have SEN, but there is a significant overlap. Where a disabled child or young person requires special educational provision they will also be covered by the SEN definition.

Broad areas of SEND

- Communication and interaction
- Cognition and learning
- Social, emotional and mental health
- Sensory and/or physical needs

This needs assessment will encompass all areas of SEND as defined above. It will focus on the needs of children and young people with special educational needs and/or disabilities (SEND), rather than the needs of their parents and carers, although services will inevitably impact on the needs of both.

Please note that where the abbreviated term 'SEND' is used within this document, it refers to special educational needs and/or disabilities.

Sefton School and Pupil Numbers

This summary report uses the most recent validated Sefton data for population, school, children and young people from January 2019 census information.

Sefton has a resident population of **274,589** people. There are **59,066** children and young people in Sefton (age 0-19) and **75,829** children and young people in Sefton (age 0-25).

There are **109** school settings in Sefton and **42,249** children and young people attending those settings, as summarised below.

40,003 children and young people are educated in **104** Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs).

2,246 children and young people attend **5** non-maintained and independent settings.

Table 1. School and Children Numbers

State funded Nursery	State funded Primary	State funded Secondary	State funded Special	Non-maintained Special	Pupil Referral Unit	Independent	All Schools
4	75	18	5	1	2	4	109
Children and young people:							
340	23,012	15,939	620	46	92	2,200	42,249
January 2019 School Census							

21% of children and young people in Sefton are living in low income households and **17%** in poverty. (A child is defined as being in poverty when living in a household with an income below 60% of the UK's average).

Continual increases can be seen in Sefton's rate of hospital admission for self-harm in children and young people aged 10 to 24, and this has increased to 602 per 100,000. This is significantly higher than the England average, which has shown only small changes over the past five years. Nationally self-harm admissions have been found to be higher for young women than young men.

Sefton's rate of hospital admission for mental health affecting those aged under 18 has fluctuated over the same period, with a high 146.6 per 100,000 in 2015/16. There has been a reduction in 2016/17 yet Sefton is still higher than England (like self-harm rates mental health admissions in England have shown minimal changes year on year).

The rate of young people not in employment, education or training (NEET) aged 16 to 17 within Sefton has been higher than the rate seen across England since the measure's introduction (2016); however, these have shown a year on year reduction.

The rate of children looked after in Sefton has shown an overall increase from 2012 to 2017, and has continually been above the rate seen across England during this period.

The rates of Sefton young people who have received a custodial sentence have fluctuated, the current year is below the national rate. However, three of the past six years have had higher rates than that of England. First time entrants to the youth justice system rates in Sefton have shown

year on year reductions and have been below the England rate in for the past four years.

Sefton validated SEN statistics for 2018

In January 2019, **4,134** (9.78%) children and young people were receiving 'SEN support' (previously school action and school action plus) in a Sefton maintained schools or post 16 provision.

The information collected via the SEN2 provides the major source of data for children and young people with statements of special educational need (statements) or Education, Health and Care (EHC) plans for whom the local authority has responsibility for the management of the SEND processes, under the 1996 Education Act and the 2014 Children and Families Act. The SEN2 provides data for the previous calendar year, so statistics labelled 2019 are for the calendar period 01/01/2018 to 31/12/2018.

In January 2019, the local authority reported it maintains an EHC Plan for **1,445** (3.32%) children and young people. The following chart shows the age distribution of those children and young people.

When we aggregate the number of children and young people for whom the local authority maintains an EHC plan (1,445) and those children and young people that are receiving SEN support in a Sefton maintained school or post 16 provision (4,134), the total number of pupils that had an EHC plan or where receiving 'SEN support' was **5,579** (13.2%), compared to a national average of 14.6% and a northwest average of 14.8%.

Table 2. Number of children and young people with special educational needs

Total Pupils	Pupils with statements or EHC plans		Pupils receiving SEN support		Total pupils with SEN	
	Number	%	Number	%	Number	%
42,249	1,445	3.4	4,134	9.8	5,579	13.2

Table 2 source: Statistics on pupils in schools in England as collected in the January 2019 school census. SEN Support numbers are for state funded maintained schools/settings.

Number of Sefton children and young people with an EHC plan.

Chart.1 shows the age distribution for those 1,445 children and young people for whom the local authority maintains an EHC plan at January 2019.

- 40% aged 11-15yrs,
- 27% aged 16-19yrs and
- 23% aged 5-10yrs.
- Noticeably 103 (7%) of EHC Plans where for young people/adults aged 20-25yrs.

Chart 1. Children and young people with a Sefton maintained EHC plan by age groups

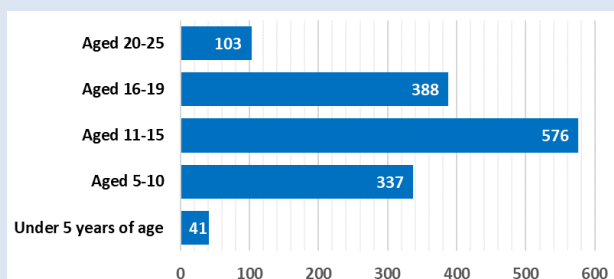


Chart.1 source: Sefton SEN2 & Gov.uk National Statistics Statements of SEN and EHC Plans: England 2019: Children and young people with an EHC plan by age group.

Placement of children and young people with a Sefton maintained EHC plan

Nationally **47.9%** of children and young people with an EHC Plan attend a mainstream school. However, there is a national increase in pupils attending special schools and reasons for this were identified by the National Audit Office as;

- a growth in the number of pupils with complex needs;
- funding pressures leading to mainstream schools having less capacity to provide tailored support;
- the focus of the school accountability system on attainment and progress measures making mainstream schools less inclined to be inclusive; and
- the 2014 reforms making parents better informed about the choices available to them and involving them more in decision-making.

Table 3 below summarises the placement information for those **1,445** children and young people for whom Sefton maintains an EHC plan.

Table 3. Children and young people for whom Sefton maintains an EHC plan

Quantity	Description
971	Children and young people attending mainstream LA maintained schools, Academies, Free schools, Special schools and Pupil Referral Units
99	Children and young people attending non-maintained and independent schools
354	Young people attending post 16 provision, including general FE and tertiary colleges/HE, sixth form colleges and specialist post-16 Institutions
21	Children and young people educated elsewhere:
(8)	<ul style="list-style-type: none"> ▪ Other arrangements made by the LA in accordance with Section 319 of the Education Act 1996 or Section 61 of the Children and Families Act 2014, include children and young people who are within Secure units or Young offenders' institutions
(12)	<ul style="list-style-type: none"> ▪ Other - arrangements made by parents in accordance with Section 7 of the Education Act 1996
(1)	<ul style="list-style-type: none"> ▪ Awaiting provision - final statement/EHC plan issued but awaiting placement.

Further detail of the placement information in Table 4 shows the number of children and young people for whom the authority maintains an EHC plan by placement type. In January 2019, the local authority reported that **362** children and young people received education in mainstream provision. A further **708** children and young people are educated in maintained and independent Special Schools.

This equates to approximately **25%** of children and young people for whom the local authority maintains an EHC plan integrated in mainstream education provision. This is significantly below the national average and could suggest the need for

greater exploration of increasing mainstream schools' capacity to offer inclusive support to SEND pupils.

There are a further **354** young people in post 16 further education, including specialist post 16 schools.

The top 3 primary needs in Sefton primary schools are:

- speech, language and communication needs,
- moderate learning difficulties
- social, emotional and mental health needs.

In secondary schools' we see this change to:

- Specific learning difficulty (this is at 24.3% compared to 20.7% nationally),
- moderate learning difficulty,
- social, emotional or mental health needs.

In Sefton special schools the largest primary need is :

- Autism, at **44.6%** compared to 28.2% nationally. This is a marked difference and shows the importance of good joint commissioning in this area, there is a need to more fully understand this and perhaps suggests the need to focus on promoting greater inclusivity and cascading of best practice to our universal offers.
- The second highest primary need in Sefton special schools is social, emotional, or mental health needs.
- The third is moderate learning difficulty at **10.07%** in Sefton compared to 23.3% nationally.

Universally this demonstrates a specific need in Sefton around

- SALT services and
- CAMHS Services.

Table 4. Number of children and young people for whom the authority maintains a statement of SEN or EHC plan by placement (2019 SEN2 return)

Non-maintained early years settings in the private and voluntary sector	Mainstream school: LA maintained (including foundation schools)	Mainstream school: LA maintained (SEN Unit)	Mainstream school: LA maintained (resourced provision)	Mainstream school: academy	Mainstream school: academy (SEN Unit)	Mainstream school: academy (resourced provision)	Mainstream school: independent school		
2	118	138	17	56	30	1	1		
Special school: LA maintained (including foundation schools)	Special school: academy/free	Special school: non-maintained	Special school: independent special schools	Alternative Provision (AP)/Pupil Referral Unit (PRU): LA maintained	Post-16: general FE and tertiary colleges/HE	Post-16: Other FE	Post-16: sixth form college	Post-16: Specialist post-16 institutions	Number of children and young people with EHC plans who are educated elsewhere
605	4	41	55	2	243	27	17	67	21
Number of children and young people with EHC plans undertaking Apprenticeship	Number of children and young people with EHC plans undertaking Traineeships	Number of children and young people with EHC plans undertaking Supported Internships							
3	8	4							

Chart 3. Primary Need of SEN Pupils in Sefton Primary Schools

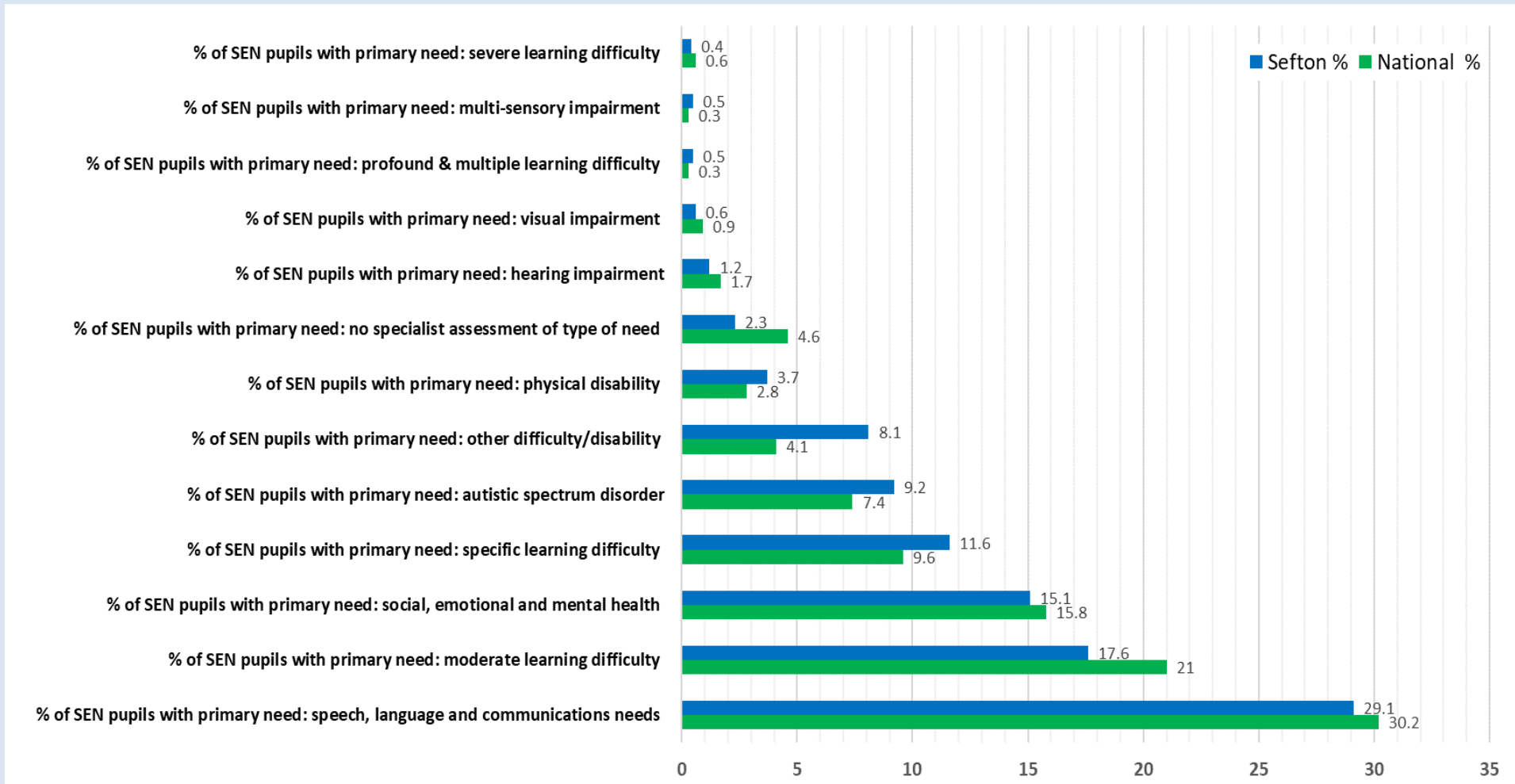


Chart 4. Primary Need of SEN Pupils in Sefton Primary Schools

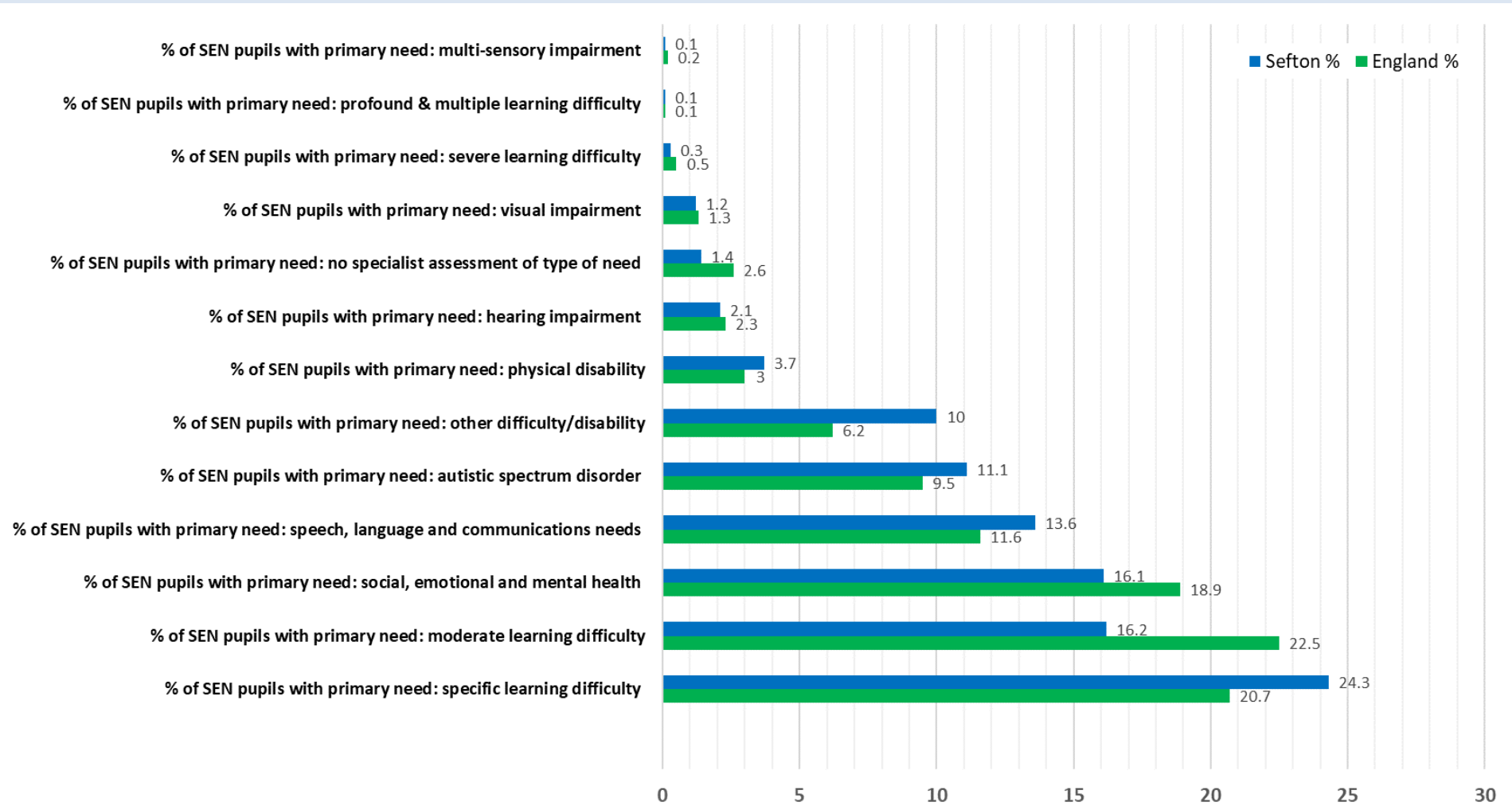
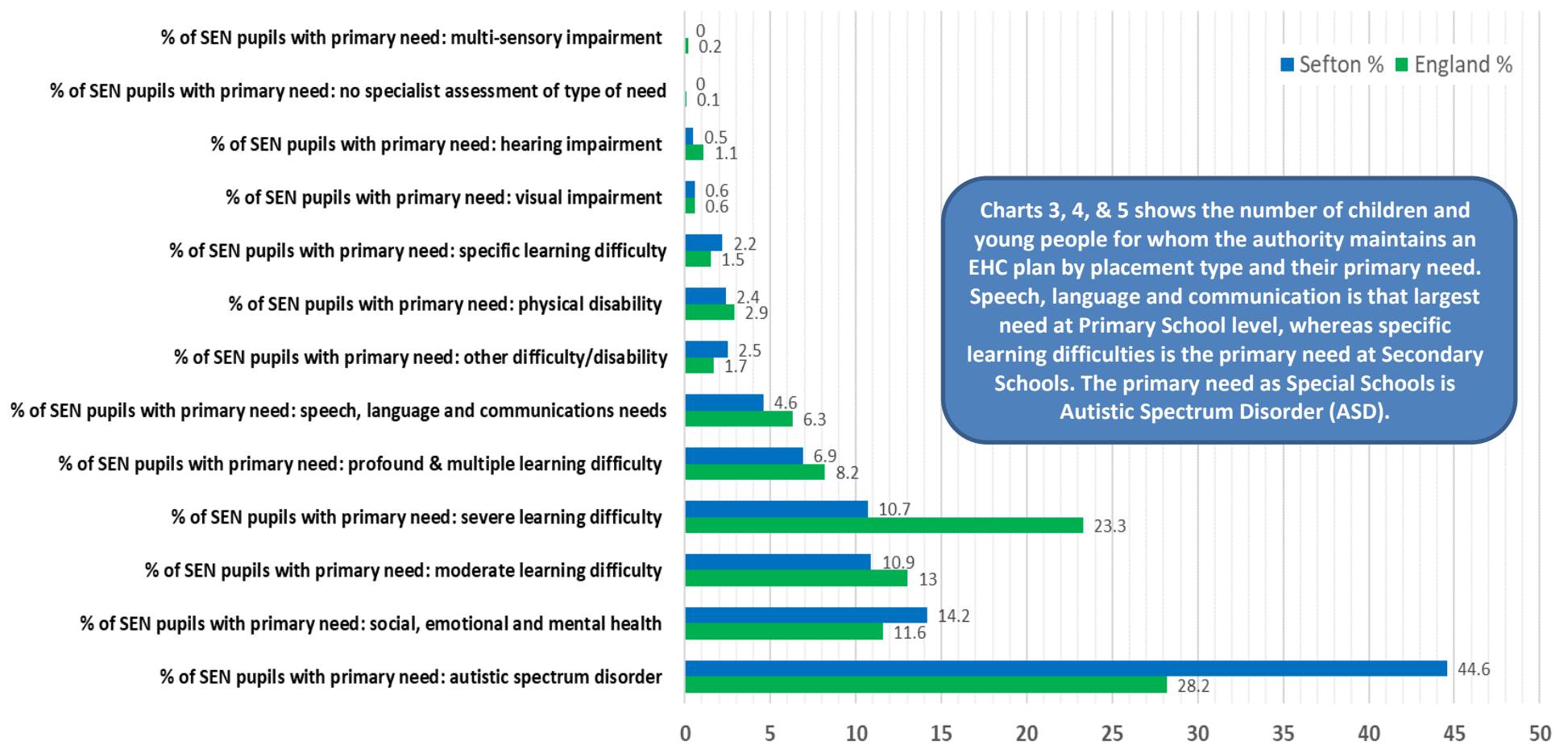


Chart 5. Primary Need of SEN Pupils in Sefton Special Schools



Charts 3, 4, & 5 shows the number of children and young people for whom the authority maintains an EHC plan by placement type and their primary need. Speech, language and communication is that largest need at Primary School level, whereas specific learning difficulties is the primary need at Secondary Schools. The primary need as Special Schools is Autistic Spectrum Disorder (ASD).

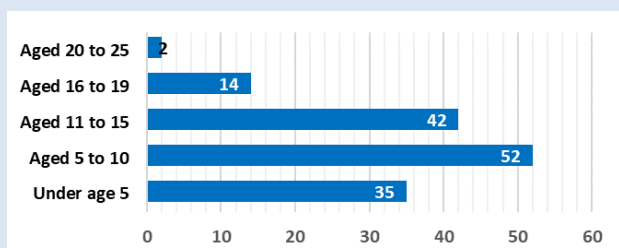
Number of EHC Assessments.

In 2018 **364** requests were made for assessment for an EHC plan, compared to a national average of 509 and a Northwest average of 442. This is a growth of **46.15%** from 168 requests in 2016 and 303 requests in 2017.

- **112** of those initial requests were refused during the 2018 calendar year (**30.8%**), compared to a national average of 24.7% and a Northwest average of **21.6%**.
- **145** children and young people were assessed and decision taken whether or not to issue an EHC plan during the 2018 calendar year.
- **145** EHC plans were made for the first time during the 2018 calendar year, compared to a national average of **339** and a Northwest average of **307**.
- **20** of the 145 EHC plans made for the first time during the 2018 calendar year were issued within 20 weeks (**13.8%**), compared to a national average of **60.1%** and a Northwest average of **63.1%**.
- A further **63** children and young people were still being assessed or their assessment has been completed but no decision had been made for an EHC plan.
- **44** initial requests for assessment for an EHC plan during the 2018 calendar year were pending.

Chart 6 below shows the age distribution for the 145 EHC plans that were made for the first time during the 2018 calendar year. 36% were for children aged 5-10 yrs; 29% for children and young people aged 11-15 yrs. The smallest demand was for young people and adults aged 20-25yrs, representing only 1.4%.

Chart 6. Number of children and young people for whom an EHC plan was made for the first time during 2018



‘SEN Support’ statistical trends

Number of School pupils receiving SEN Support (2014 - 2018)

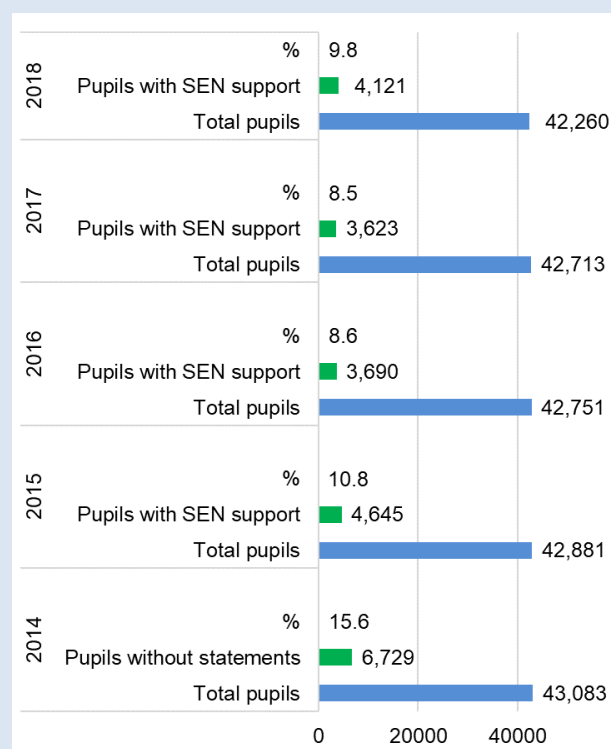
Over the last decade the number of children educated in the borough has remained at approximately **43,000** pupils (+/- 0.7%).

Chart 10 below details the number of children and young people for whom the authority provides ‘SEN support’ in schools and illustrates the trend in numbers in Sefton over the previous five-year period (2014 – 2018), including the reported ‘SEN support’ in January 2019. The average number of children and young people receiving ‘SEN support’ in a Sefton school setting is **10.66%**.

In 2018 4,121 (**9.8%**) of school pupils were in receipt of ‘SEN support’, compared to a national average of **11.7%** and a northwest average of **11.8%**. However, disability is likely to be under-reported within this number.

Population projections for Sefton suggest that the younger population will remain relatively stable and it is anticipated that the trend in pupil numbers and the associated demand for ‘SEN support’ will remain relatively consistent at approximately **10%** of all pupils (+/- 0.7%).

Chart 10. Pupils Receiving SEN Support



Children & Young People with a Sefton Maintained EHC Plan (2014 - 2018)

The following chart 11 shows the total number of children and young people for whom the local authority has maintained statements of SEN or EHC plan over the previous five-year period (2014 – 2018).

It illustrates the trend for Sefton over that period, with a clear shift from SEN Statements to EHC plans in 2016 & 2017, in accordance with the SEND reform expectation that all statements should have been converted to EHC plans by 1st April 2017.

Sefton has seen a considerable **47.3%** rise in number of children and young people with a Sefton maintained EHC plan over the five-year period 2014 – 2018 inclusive, from 981 to 1,445, an increase of **464**.

This increase in demand is likely to be related to the 2014 SEND reform, extending the rights and protection to children and young people by introducing a new education, health and care plan, which saw a subsequent increase in demand. The National Audit Office reported in September 2019 a national rise of 16.8% in EHC plans between 2014 and 2019. The rise is also attributable to the law extended the special educational needs system to young people up to the age of 25. In Sefton, this increased the cohort by more than 100 young people and adults aged 20-25yrs.

Population projections for Sefton suggest that the younger population will remain relatively stable and it is anticipated that the trend in demand for EHC plans will continue to grow at an average rate of at least **12%** per annum.

Chart 11. Children and young people with a SEN Statement or EHC plan

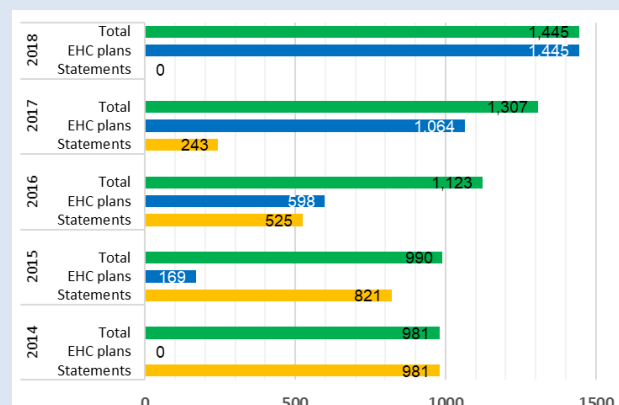
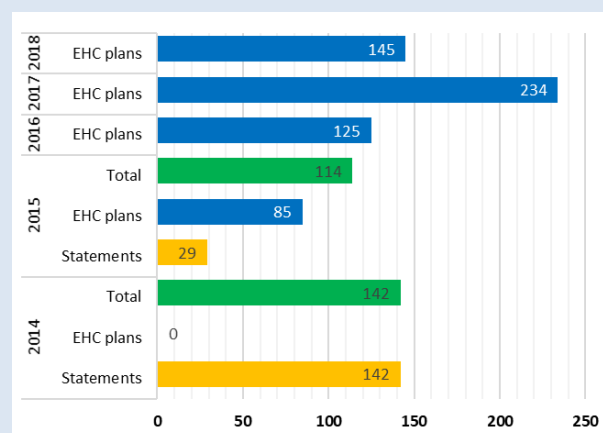


Chart 11 source: Gov.uk National Statistics Statements of SEN and EHC Plans: England 2019: Statistics and analysis on statements of special educational needs (SEN) and education, health and care (EHC) plans in Sefton.

Number of SEN Statements & EHC Plans issued by Sefton (2014 - 2018)

The following chart 12 shows the number of statements and EHC Plans issued annually over the previous five-year period (2014 – 2018). The average number over the five-year period was **152** EHC Plans per annum. Given the backlog of requests carried forward from 2018 to 2019, coupled with the increased number of requested received for assessment to date, it is anticipated that the number of EHC plans issued in 2019 will increase significantly to approximately **338** plans, a projected increase of **233%**.

Chart 12. Number of children and young people with a new statement or EHC plan by calendar year



Percentage of new EHC Plans issued within 20 weeks (2014 - 2018)

Chart 13. Percentage of new EHCP issued within 20 weeks

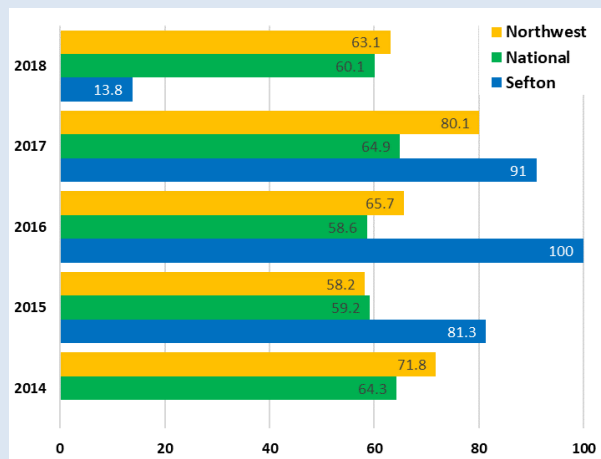


Chart 13 above, shows the percentage of new EHC plans issued within the statutory recommended 20-week period, over the last five years (2014-2018) inclusive.

It shows that Sefton’s overall performance was better than both the national and northwest averages consecutively for 2015, 2016 and 2017, at a three-year average of **90.8%**. However, this performance dropped significantly in 2018 to **13.8%**. In 2019, at the time of the Ofsted/CQC revisit to monitor progress against the written statement of action (WSOA), the performance had dropped to **3%**.

Since the beginning of July 2019 targets have been set to completed the backlog of EHCP requests by December 2019 also to ensure, as far as reasonably practical, that all new requests for assessment received since the 1st July 2019 are completed within the statutory recommended 20-week period. The number of EHC Plans being finalised in each month is increasing and the percentage completed within the statutory recommended 20-week period is also increasing. It is very unlikely that the Council’s overall performance for those EHC Plans being finalised within a 20-week period will exceed **30%** because of the delay’s incurred by accumulating the backlog of assessments. However, the local system will be able to demonstrate sustained improvement on the number of finalised plans and the timeliness of completing assessment and plans.

SEN Appeals

Parents, carers and young people can appeal to the Special Educational Needs and Disability Tribunal if they disagree with a decision that Sefton Council has made about an education, health and care (EHC) Plan.

Disagreement Resolution in Sefton is provided by Global Mediation. The percentage of cases going to tribunal following mediation has fluctuated in Sefton, 33.3% in 2016 (compared to 24.9% Nationally) went to tribunal, 44.4% in 2017 (nationally this was 25.3%) and 20% in 2018 (nationally 25.2%).

Reported Council Expenditure on SEND (2014 - 2018)

Chart 14. Reported Expenditure (SEN - S251 outturn)

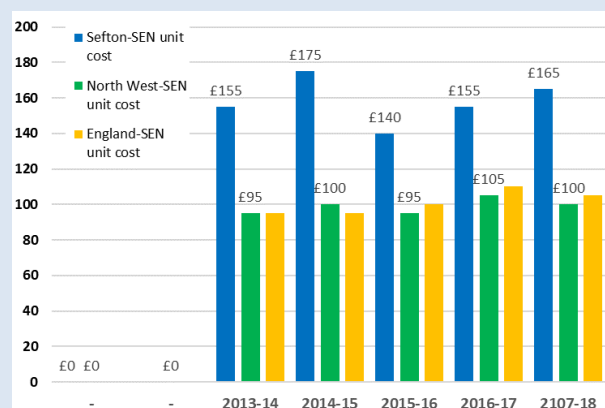


Chart 14 above shows the average spend per week per child/young person for whom the local authority maintains an EHC Plan. The metrics show the reported expenditure in Sefton over the previous four financial year period (2014 – 2018). The figure is based on the total reported weekly expenditure on SEND for the local authority, divided by the number of pupils with statements or EHC plans.

In Sefton, this figure was **£165** per week per child, compared to the average for all English single tier and county councils of **£105** and a Northwest average of **£100**. This includes the cost of support services, direct payments, specialist transport, administration, assessment, coordination and monitoring.

The figures suggest that Sefton spent approximately **£3.3m** more than all English single tier and county councils over the typical 38-week

academic year in 2017/18 for those 1,445 children and young for whom it maintains and EHC plan.

Table.5 below shows a summary of the 2018/19 financial year spend on high needs funding in Sefton.

High needs funding is intended to provide the most appropriate support package for children and young people (from early years up to aged 25) with special educational needs and/or disabilities (SEND) in a range of settings, taking account of parental and student choice.

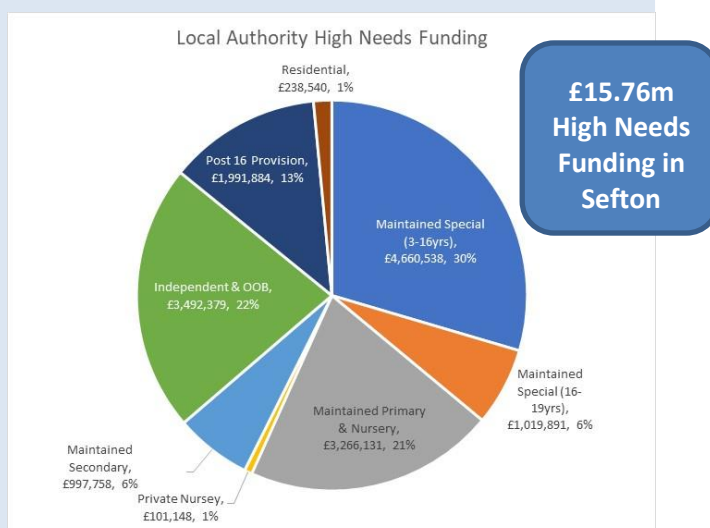
Table 5. 2018/19 High Needs Funding in Sefton

Spend Analysis (2019)			
Setting	Age	Qty.	£ Total
Maintained Special	(3 - 16)	504	£4,660,538
Maintained Special	(16 - 19)	121	£1,019,891
Maintained Primary & Nursery	(3 - 11)	611	£3,266,131
Private Nursey	(2 - 5)	48	£101,148
Maintained Secondary	(11 - 16)	182	£997,758
Independent & OOB	(3 - 19)	75	£3,492,379
Post 16 Provision	(16 - 24)	158	£1,991,884
Residential	(5-16)	4	£238,540
		1703	£15,768,269

- **£5.68m (36%)** of the spend is attributed to 625 pupils (aged 3-19yrs) educated in the local authority’s five special schools, at an average cots of £8,838 per pupil.
- **£3.49m (22%)** of the spend is attributed to 75 children and young people (aged 3-19yrs) who are educated out of borough or at an independent setting, at an average cost of £49,700 per annum.
- **£3.27m (21%)** is attributable to ‘top-ups’ for 611 pupils (aged 3-11yrs) across the Seftonmaintained nursery and primary schools, at an average cost of £5,346 per pupil.
- **£1.22m** is attributed to 215 children with maintained EHC Plans. £1.85m is attributed to 357 children receiving ‘SEN support’. A further £200k is attributed to 39 children who’s SEND requirement is not recorded, a matter that is currently beign adressed.
- **£1.99m (12.7%)** is attributed to 158 students (aged 16-24yrs) who are educated at post-16 provision both within and outside of the borough. Allocations vary significantly for individual students, ranging from £97 to £197,678 per annum.

- **(6.3%)** is attributable to ‘top-ups’ for 182 pupils (aged 11-16yrs) across the Sefton maintained secondary schools, at an avergae cost of £5,482 per pupil. £559k is attributed to 95 young people with maintained EHC plans. £408k is attributed to 82 children receiving ‘SEN support’. A further £30k is attributed to 5 young people who’s need is not classified, a matter that is currently beign adressed.
- **£238.5k (1.5%)** is attributed to 4 children and young people (aged 5-16yrs) who are educated at specialist residential provision, at an avergae cost of £59,635 per pupil.
- **£101k (0.64%)** is attribute to 48 children attending private nursery provisions for a collective total of 684 hours of childcare per week, at an average cost of £9.05 per hour.

Chart 15. 2018/19 High Needs Funding in Sefton



Whilst the annual expenditure on children and young people with special educational needs and/or disabilities (SEND) has increased by an overall figure of 17.7% between 2014 and 2018, the2018/19 high needs budget overspent by £2.3m. In September 2019, the National Audit Office highlighted that *nationally funding has not kept a pace with demand, with a reduction of 2.5 % in real terms from 2013/14 – 2017/18*. This highlights the acute need to ensure that the local area maximised the opportunity for and the value of integrated expenditure available.

It is anticipated that the demand against the high needs block of the Sefton dedicated schools grant (DSG) will continue to grow, accounting for the

12% forecast growth in demand for EHC Plans. It is estimated that the growth could be approximately **6%** (£936k) per annum.

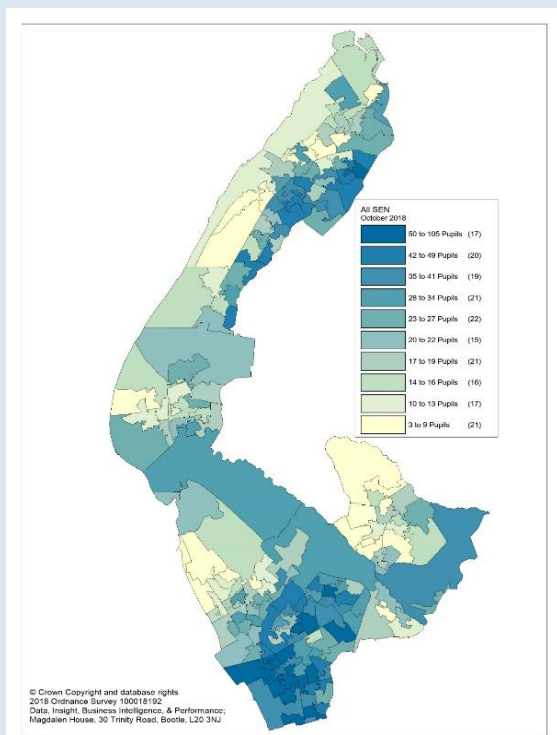
Sefton SEND Cohort by Locality

Maps 1 to 4 show the distribution of the children and young people with special educational needs and/or disabilities (SEND) in Sefton, including total need (Map 1), those for whom the local authority maintains and EHC Plan (Map 2), those receiving SEN Support in a maintained school setting (Map 3) and the distribution of high needs funding (Map 4).

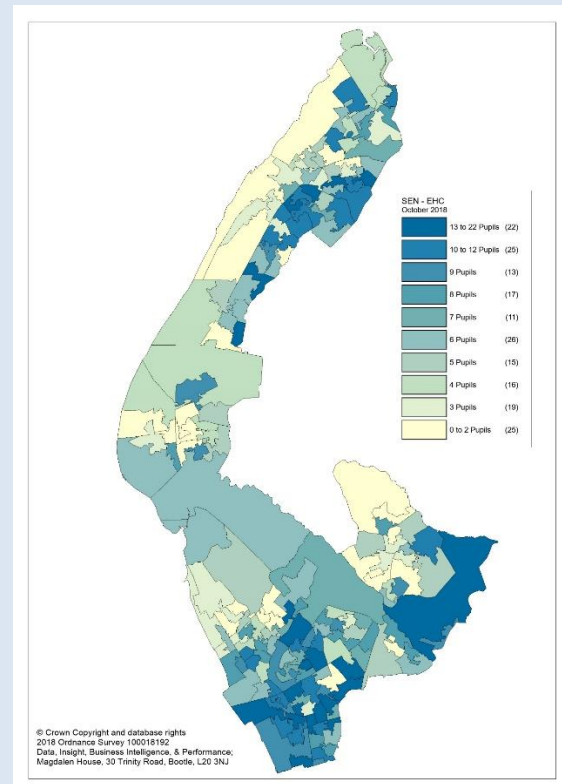
Although there is some disparity between the most deprived and most affluent areas across the borough, the distribution of SEND largely follows that of the general child population.

In Linacre Ward for example we see 12% of all SEN Children and 136 children and young people with a EHC Plan whereas Birkdale Ward sees 8.7% and 65 Children. This demonstrates the need for locality based commissioning, exploring opportunities for co-location of services, matrix management, locality aligned staff, and locality focussed needs analysis and strategic response.

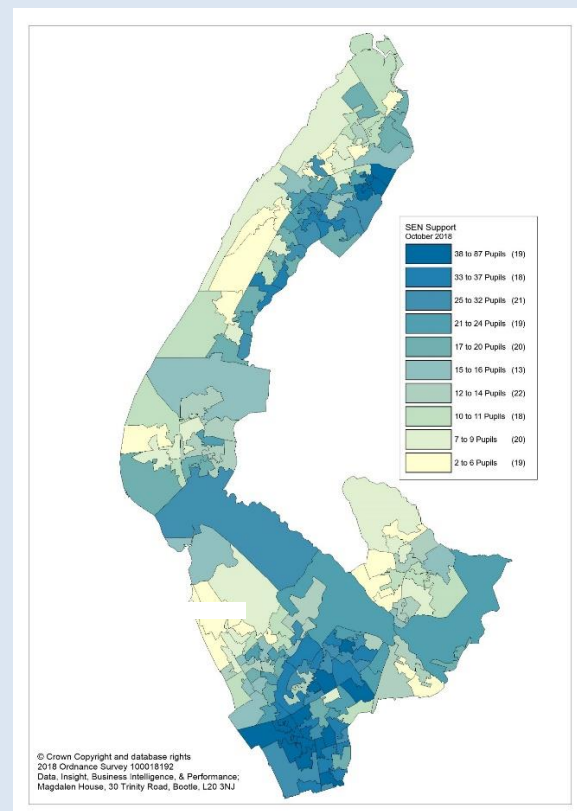
Map 1. Sefton SEN cohort, including EHC Plan and SEN Support (count by LSOA)



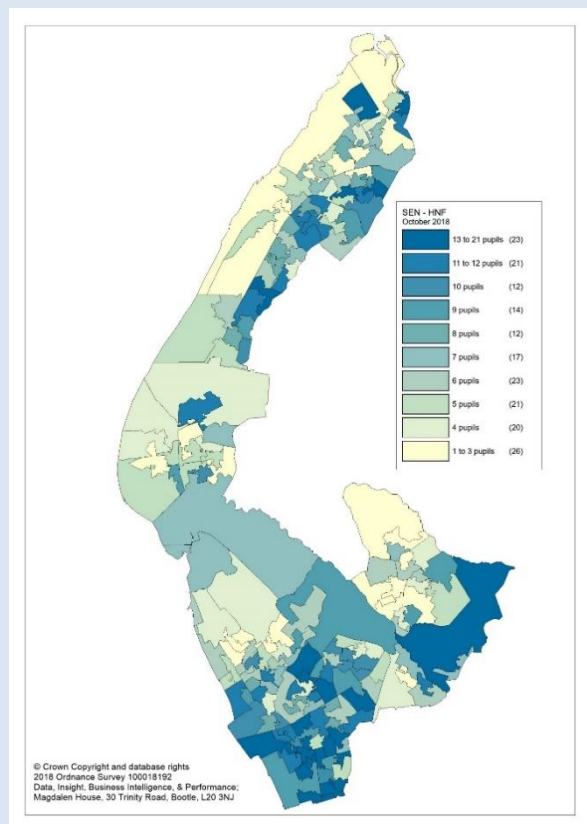
Map 2. Sefton SEND cohort with an EHC Plan (count by LSOA)



Map 3. Sefton SEND cohort receiving SEN Support (count by LSOA)



Map 4. Sefton SEND cohort receiving High Needs Funding (count by LSOA)



Sefton School SEN population educational outcomes

The percentage of children receiving ‘SEN support’ at KS2 meeting expected standards in reading, writing and maths is moderately below national and statistical neighbour averages, although progress scores at KS2 are positive and above national and statistical neighbour averages,

Those children with an EHC Plan at KS2 meeting expected standards in reading, writing and maths is significantly below national and statistical neighbour averages.

The progress scored at KS2 are also below national and statistical neighbour averages.

Children with an EHC plan at the end of key stage 2 are making better progress in reading, writing and mathematics than at the time of the last inspection. In reading, the progress made is better than for similar pupils nationally. In writing, the progress made is improving but still lags

significantly behind the national average. In mathematics, improvements are inconsistent.

The Attainment 8 score for young people receiving ‘SEN support’ at KS4 is moderately below national and statistical neighbour averages.

The Attainment 8 score for young people with an EHC Plan at KS4 is marginally better than national and statistical neighbour averages.

Progress 8 scores for both young people receiving ‘SEN support’ and those with an EHC Plan at KS4 are broadly like their peers nationally, but below statistical neighbour averages.

The percentage of KS4 SEN pupils with an EHC plan going to, or remaining in education & employment/training overall is above national and statistical neighbour averages. However, the percentage of KS4 SEN pupils who received ‘SEN support’ in secondary school going to, or remaining in education & employment/training overall is marginally below National and statistical neighbour averages.

This is illustrated in Chart.16.

Chart 16. 2018/19 High Needs Funding in Sefton

The metrics below show the range of educational and other outcomes for Sefton children and young people with special educational need and/or disabilities (SEND), compared to statistical neighbours and national comparators.

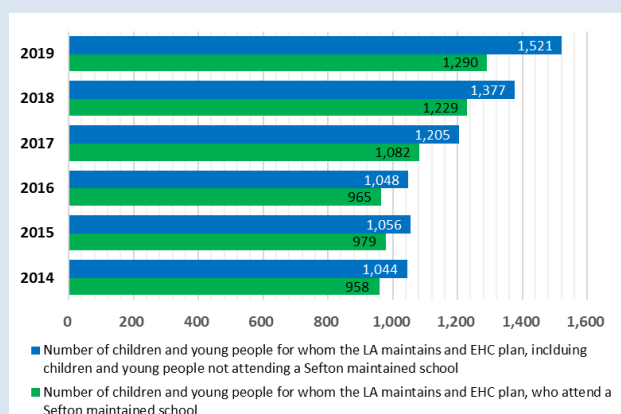
	2015/16 (Sefton)	2016/17 (Sefton)	2017/18 (Sefton)	Statistical Neighbour Comparison	National Comparison
Percentage of children achieving expected standard at Key Stage 2 in Reading, Writing and Maths for pupils with EHCP	8.00%	5.00%	1.00%	10.20%	9.00%
Percentage of children achieving expected standard at Key Stage 2 in Reading, Writing and Maths - SEN pupils without EHCP	10.00%	15.00%	21.00%	24.50%	24.00%
Progress scores at Key Stage 2 in Reading for pupils with EHCP	not available	-3.00	-4.50	-3.15	-3.80
Progress scores at Key Stage 2 in Writing -for pupils with EHCP	not available	-6.10	-6.70	-4.10	-4.10
Progress scores at Key Stage 2 in Maths - for pupils with EHCP	not available	-3.10	-6.20	-3.47	-3.80
Progress scores at Key Stage 2 in Reading - SEN pupils without EHCP	not available	-0.70	1.10	-0.44	-1.00
Progress scores at Key Stage 2 in Writing - SEN pupils without EHCP	not available	-2.40	-1.60	-1.55	-1.80
Progress scores at Key Stage 2 in Maths - SEN pupils without EHCP	not available	0.30	1.00	-0.45	-1.00
Average Attainment 8 score per pupil at end of Key Stage 4 for pupils with EHCP	17.30	12.80	14.30	13.34	13.50
Average Attainment 8 score per pupil at end of Key Stage 4 for SEN pupils without EHCP	33.50	30.40	29.50	32.20	32.20
Average Progress 8 score per pupil at end of Key Stage 4 for pupils with EHCP	-0.95	-0.97	-1.12	-1.12	-1.09
Average Progress 8 score per pupil at end of Key Stage 4 for SEN pupils without EHCP	-0.63	-0.32	-0.70	-0.49	-0.43
Percentage of SEN children and young people who are persistent absentees - with an EHCP	0.82	0.88	0.79	not available	not available
Percentage of SEN children and young people who are persistent absentees - without EHCP	2.34	2.35	2.59	not available	not available
Percentage of SEN children and young people who are subject to a fixed term exclusion - with an EHCP	0.27	0.30	0.23	not available	not available
Percentage of SEN children and young people who are subject to a fixed term exclusion - without an EHCP	0.63	0.67	0.72	not available	not available
Percentage of SEN children and young people who are subject to a permanent exclusion - with an EHCP	0.00	0.00	0.00	not available	not available
Percentage of SEN children and young people who are subject to a permanent exclusion - without an EHCP	0.02	0.07	0.04	not available	not available
Percentage of KS4 SEN pupils with an EHCP going to, or remaining in education & employment/training overall	86.00%	92.00%	92.00%	91.80%	91.00%
Percentage of KS4 SEN pupils without EHCP going to, or remaining in education & employment/training overall	90.00%	89.00%	85.00%	89.00%	88.00%
% KS4 SEN pupils with EHCP going to, or remaining in education & employment/training overall (inc special schools)	not available	92.0%	89.0%	90.0%	90.0%
% KS4 SEN Pupils With SEN Support going to, or remaining in education & employment/training overall (inc special schools)	not available	89.0%	85.0%	89.0%	88.0%
16-17 yr olds with SEN in education & training, as at 31 December	87.2%	85.3%	84.4%	86.5%	88.5%
Percentage of KS4 SEN cohort in Education, Employment or Training at 17	90.0%	89.0%	86.0%	89.2%	89.0%
Percentage of KS4 SEN cohort in Education, Employment or Training at 17 (inc special schools)	not available	90.0%	86.0%	89.2%	89.0%
%19 year olds qualified to Level 2, inc English & Maths - with EHCP	16.8%	17.3%	13.8%	14.5%	14.8%
%19 year olds qualified to Level 2, inc English & Maths - SEN pupils without EHCP	34.9%	32.6%	31.5%	35.4%	35.6%
%19 year olds qualified to Level 3 - with EHCP	15.0%	18.3%	12.1%	12.3%	13.2%
%19 year olds qualified to Level 3 - SEN pupils without EHCP	21.0%	34.2%	28.2%	29.8%	30.8%

Sefton local SEN statistics (2019)

Further analysis of the placement information for children and young people with special educational need and/or disabilities (SEND) taken at the beginning of each financial year, shows that the number of children and young people for whom Sefton maintained an EHC plan increased to **1,521** in April 2019. The following chart shows a summary of the growth in EHC Plans maintained by the local authority, with a continuing upward trend.

A further snapshot of data taken at the beginning of July 2019 shows that the number of children and young people for whom the authority provides 'SEN support' in schools had increased to **4,298** and the number of children and young people for whom Sefton maintains an EHC plan had increased to **1,584**.

Chart 17. Children and young people with an EHC plan (April 2019).



Equality & Diversity

The protected characteristics for the cohort of children and young people with special educational need and/or disabilities (SEND), as outlined in the Equality Act (2010) as described below.

Chart 18. Children and young people with an EHC plan (Gender)

SEN Need	Cohort	Gender	
		Female	Male
Autistic Spectrum Disorder	624	106	518
Behavioural, Emotional and Social Difficulty	12	2	10
Hearing Impairment	13	4	9
Moderate Learning Difficulty	274	106	168
Multi-Sensory Impairment	3	2	1

Other Difficulty/Disability	6	2	4
Physical and Medical Difficulty	5	2	3
Physical Disability	39	15	24
Profound & Multiple Learn Difficulty	18	11	7
Severe Learning Difficulty	173	58	115
Social, Emotional and Mental Health	223	40	183
Speech, Lang or Communication Difficulty	109	26	83
Specific Learning Difficulty	74	25	49
Visual Impairment	11	7	4
Sefton SEN EHCP Cohort	1,584	406	1,178

Chart 18 shows that there are significantly more males than females for whom the local authority maintains and EHC plan, with males accounting for over **74.3%** of the cohort.

The age distribution for those 1,584 children and young people for whom the local authority maintains an EHC plan is:

- 29 (**less than 2%**) are under the age of five
- 425 (**27%**) are aged 5-10yrs.
- 628 (**40%**) are aged 11-15yrs,
- 350 (**22%**) are aged 16-19yrs and
- Noticeably 152 (**10%**) of EHC Plans where for young people and adults aged 20-25yrs.

This shows a slight rise in the number of 5-10yr olds, a maintained percentage of 11-15yr olds, a reduction in the number of 16-19yr olds and an increase in the number of 20-25yr olds from the January 2019 analysis.

91% of the cohort of children and young people with special educational need and/or disabilities (SEND) are classified as 'white/British', with less than **6%** classified as other nationality and **3%** unclassified.

Only **4%** of the cohort have English as an additional language.

Chart 19. Children and young people with an EHC plan (Ethnicity)

SEN Need	Ethnicity WBRI	Ethnicity Other than WBRI	Ethnicity NOBT / REF / Blank
Autistic Spectrum Disorder	568	33	23
Beh., Emotional and Social Diff	11	1	0
Hearing Impairment	12		1
Moderate Learning Difficulty	260	13	1

Multi-Sensory Impairment	3	0	0
Other Difficulty/Disability	6	0	0
Physical and Medical Diff	5	0	0
Physical Disability	34	3	2
Profound & Multiple Learn Diff	18	0	0
Severe Learning Difficulty	146	16	11
Soc., Em. and Ment. Health	203	13	7
Speech, Lang or Comm. Diff	91	15	3
Spl. Learning Diff(Dyslexia)	72	1	1
Visual Impairment	10	1	
Sefton SEN Cohort	1,439	96	49

Specialist Transport

Parents and carers are responsible for ensuring that their children attend school regularly and on time. Most pupils in Sefton.

- walk to school, accompanied, if necessary, by a parent/carer; or
- travel to school on public transport; or
- are driven to school by parents.

Wherever possible the local authority expects parents to make similar arrangements for children and young people with special educational need and/or disabilities (SEND) attending mainstream schools. However, the local authority has a statutory duty, and in appropriate circumstances discretionary powers, to help with home to school travel, based on a pupil’s individual needs and circumstances. The following chart shows the number of children and young people (aged 5-16yrs) with special educational needs and/or disabilities (SEND) who received specialist transport provision over the last four-year period:

Chart 20. Children and young people with an EHC plan (Specialist Transport Provision)

Academic Year	C&YP (5-16yrs)
2014-15	399
2015-16	469
2016-17	557
2017-18	640

The chart illustrates a growth in demand of over **160%** over the four-year period for the 5-16yrs cohort.

In 2019 Sefton Council is providing specialist transport provision for:

- 725 5-16 year olds with SEND
- 123 post-16 with SEND

This is an overall increase of 3.4% on the 2018 academic year, from a total of 820 last year to 848 this year.

A Personal Transport Budget (PTB) is funding which can be paid to families to help get their child (who has special educational needs or disabilities (SEND)) to school or college, rather than their child travelling on a vehicle contracted by the Council. There are currently 100 children and young people in receipt of a personal transport budget, an increase of 43% on the previous 70 last year.

However, Children and young people with special educational needs and/or disabilities (SEND) who attended the Youth Participation Conferences have said that they would like further support in travel training.

Sefton Aiming High

Disabled children in Sefton & their families are supported by Aiming High for Disabled Children. Aiming High for Disabled Children is a Sefton Council service that ensures disabled children, young people and their families have the same access to fun, fulfilling activities and life chances as those without disabilities by providing specially tailored sessions during term-time and holidays that young people can access and specialist support when our young people reach key 'transition points', such as moving from education into employment.

On average 234 children and young people attend, with an average of 1,847 visits; more than 8,773 hours of provision. The total number of visits increases to an average of 2,365 days including parents and siblings at Family Days, increasing the provision to 11,329 hours. On average 99 staff are engaged in the Aim Higher provision, working 6,220 casual hours to support the programme at a cost of £59,894. 12 regular volunteers also contribute 636 hours of time to the cause.

Short Breaks in Springbrook Residential Unit

Springbrook's primary role is to provide short residential breaks to disabled young people usually between the ages of 8-17 years who have been identified as needing such a service by a Social Worker assessment. Springbrook can accommodate up to 5 young people at any one time, dependant on the assessed care needs of individual people. Pre-planned stays are available for two to three nights to young people, male or female, between the ages of 8 and 17yrs with a learning difficulty.

There is a rolling programme of stays and an allocation group for the young person, devised on age and on compatibility for young people, so they can mix with others with similar interests and needs.

The residential unit is committed to offering individualised programmes of stays for service users in a homely, friendly, fun environment.

40 young people currently make use of the residential unit and on average a total of 871 nights stay is offered each year, equating to 16, 558 hours of provision.

Qualitative Evaluation of Sefton's SEND Provision

In December 2018 Edge Hill University completed a Consultative Qualitative Evaluation of the local are SEND provision in Sefton.

The report highlights the lack of accessibility and consistency in provision within the community, especially around travel.

The participants reflected low awareness of SEND issues in the community and in general for teachers and health professionals suggesting the need for a wide spread training programme.

The report highlights long wait times, cancelled appointments and inadequate pathways in our Health offer. There is a highlighted need for greater use of adaptations and equipment in the home to ensure the home is viewed as a safe environment for children and young people with SEND. The results call for a greater and wider

range of activities that are equitably spread across the borough to help address the identified growing need to address social isolation.

The report calls for an increase in mainstream school's capacity to adequately support and make reasonable adjustments for children with SEND. The report suggests a rise in electively home educated children and young people with special educational needs and/or disabilities (SEND). The latest statistics on this show an overall rise of 100 Children educated at home from January 2016 to June 2019 (from 0.23% to 0.49% of the school population), and of these children and young people home educated, 8% cited SEND provision as the reason.

The report calls for the need for children and young people and their families to feel they are being listened to. Transitions from primary to secondary school is highlight as inadequate. There is a call for the local offer to co-ordinate child health and education professionals better to improve communication, such as child health and wellbeing hubs.

Between October 2018 and January 2019 WAVES consultants were commissioned to review high needs funding in Sefton, with the local joint commissioning arrangements as a line of enquiry. Along with recommendations on educational provision and sufficiency the report made the following recommendations and observations;

- There must be a joint formal commissioning forum bringing together education, health and care, as well as the forum for producing EHCPs, which must consider arrangements for personal budgets, and have a clear structure for decisions making and allocation of responsibilities.
- The report noted an overspend, a rise in out of area placements, a lack of capacity in specialized schools, and a rise in the number of primary school kids receiving support.
- The report recommended building in annual parent carer satisfaction surveys.
- The report notes that inclusion and access to services for BEM groups is not specifically monitored (the SEND Code of practice requires this) and corporately this should be part of Sefton's commitment to Equality. The National

Audit Office report in September 2019 referenced the significance within traveller communities.

- The report noted that there is no information on specialised health care services on the Council's Local Offer. These are services which are commissioned by NHS England on a regional basis and should form part of the whole pathway commissioning activity.
- Sefton is lacking a Swift Access arrangement protocol. The local offer must publish the Joint Commissioning Strategy and arrangements for joint commissioning and the strategy must consider effective ways of harnessing local community's needs.

The Youth Participation Conferences held in March 2019 was attended by 117 pupils, representing 22 schools and 2 colleges in Sefton.

On the day children and young people gave their views on the 4 Preparation for adult outcomes.

The comments received suggested that children and young people with a special educational need and/or disabilities (SEND) still feel that they can meet friends in their local community, playing out in the street, in local parks, at youth groups such as Brownies and sporting activities, and on-line.

70% of primary pupils stated they did not attend Aiming High activities with this rising to 83% of the young people aged over 11. It was felt that Aiming High was done through parents and you had to be referred to it. Aiming High needed to be more child/young person friendly, advertising what is on offer to children and young people for example posters up in school.

The participants identified that they would like more sports clubs, youth clubs that they could just opt in to and out of without a referral form.

Within the 'Transition' workshop the young people identified several ways in which they were supported at times of transition. They identified that they would like further support in travel training, help with life skills and longer taster sessions in college.

Young people identified many barriers for them gaining employment including academic achievement, health needs and ability to travel independently.

Community Health Activity and Average Waiting Times

Waiting times to access health services such as speech and language therapy, occupational therapy, physiotherapy, autistic spectrum disorder (ASD) diagnostic assessment and community paediatrics were an area of concern during that last SEND inspection and had worsened at the time of the 2019 re-visit.

Below are summary tables of Community Services commissioned by South Sefton Clinical Commissioning Group and Southport & Formby Clinical Commissioning Group. They provide a snapshot of key service activity and demand information.

South Sefton Activity and Average Waiting Times

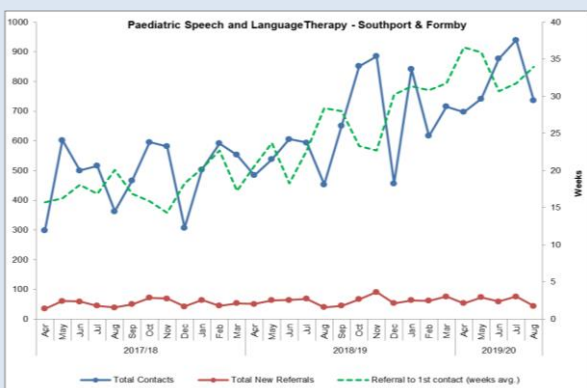
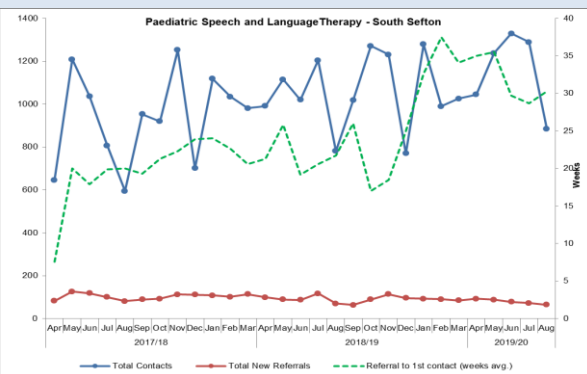
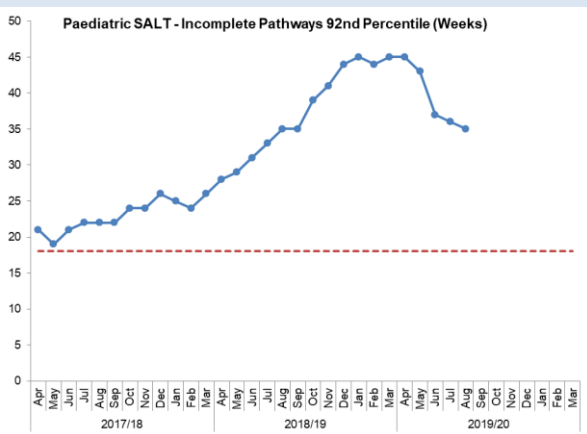
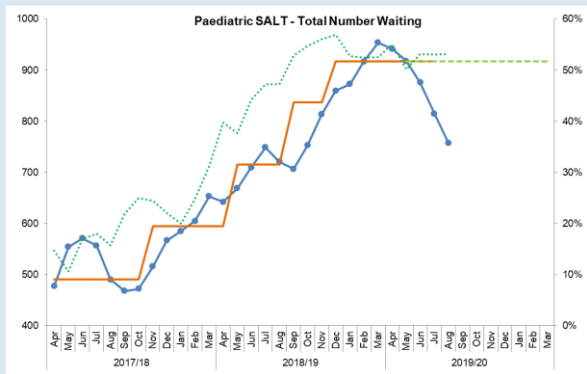
CCG	Service	Measure	2018/19 Outturn	2019/20 Plan	Forecast
South Sefton CCG	Paediatric Continence	Caseload at Month End	264	264	254
		Total Contacts (Domiciliary)	1734	1734	1618
		Total New Referrals	171	171	194
	Paediatric Dietetics	Caseload at Month End	5	5	203
		Referral to 1st Contact (weeks Ave)	8.6	8.6	6.9
		Total Contacts	356	356	487
		Total Contacts (Domiciliary)	64	64	77
		Total Contacts (Clinic)	292	292	408
		Total New Referrals	280	280	262
	Paediatric Occupational Therapy	Caseload at Month End	201	201	139
		Referral to 1st Contact (weeks Ave)	15.9	15.9	12.8
		Total Contacts (Domiciliary)	4878	4878	4006
		Total New Referrals	619	619	535
	Paediatric SALT	Referral to 1st Contact (weeks Ave)	24.8	20	31.8
		Total Contacts (Domiciliary)	12833	12833	13874
Total Contacts Complex Cochlear (N&S Sefton)		507	507	281	
Total New Referrals		1097	1097	953	
Total New Referrals Complex Cochlear (N&S Sefton)		6	6	0	

Southport & Formby Activity and Average Waiting Times

CCG	Service	Measure	2018/19 Outturn	2019/20 Plan	Forecast
Southport & Formby CCG	Paediatric Continence	Caseload at Month End	212	212	216
		Total Contacts (Domiciliary)	1584	1584	1562
		Total New Referrals	135	135	161
	Paediatric Dietetics	Caseload at Month End	90	90	281
		Referral to 1st Contact (weeks Ave)	8.5	8.5	6.1
		Total Contacts	541	541	718
		Total Contacts (Domiciliary)	40	40	65
		Total Contacts (Clinic)	501	501	653
		Total New Referrals	291	291	302
	Paediatric Occupational Therapy	Caseload at Month End	150	150	118
		Referral to 1st Contact (weeks Ave)	14.3	14.3	13.3
		Total Contacts (Domiciliary)	3343	3343	3259
		Total New Referrals	566	566	521
	Paediatric Physiotherapy	Caseload at Month End	64	64	63
		Referral to 1st Contact (weeks Ave)	5.8	5.8	6.4
Total Contacts (Domiciliary)		6103	6103	4740	
Total New Referrals		553	553	562	
Paediatric SALT	Referral to 1st Contact (weeks Ave)	26.1	20	33.9	
	Total Contacts (Domiciliary)	7786	7786	9559	
		Total New Referrals	746	746	739

Two services: Dietetics and Speech and Language (SALT) are showing notable levels of increased activity in 2019/2020. This reflects increased levels of investment to address either waiting times or access.

Paediatric Speech and Language Therapy (SALT)

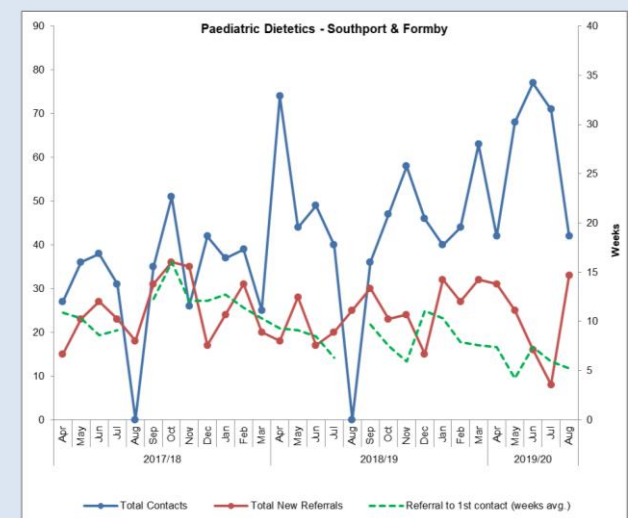
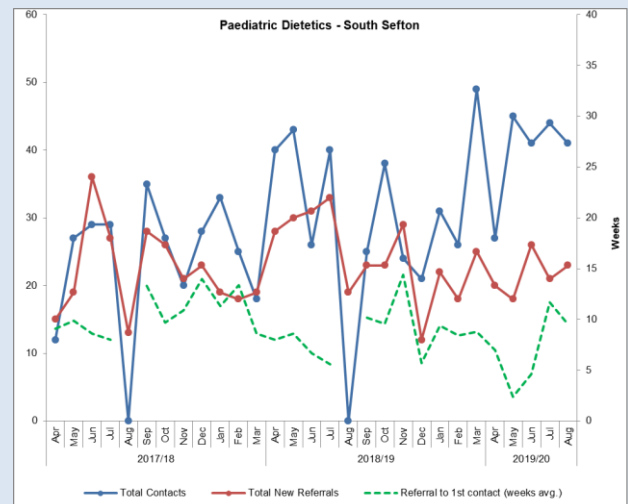


The charts indicate fluctuating referral levels with no sustained increase noted but waiters remain above the 18-week target for Sefton.

There is no pattern of increased referrals, but the number of contacts have risen steadily since 2017/18. This has seen a corresponding increase in the time people are waiting for their first contact. This has risen from below 18 weeks in 2017/18 to 30 weeks +, with more than 50% now waiting more than 18 weeks. This indicates that the capacity of the service has been affected not by increased referrals but increase in the average length or frequency of support.

It should be noted that a reduction in the total number waiting and the percentage of those waiting above 18 weeks has reduced from the start of 2019, this reflects new investment to provide extra capacity to reduce the waiting list and provide recurrent increased capacity. The agreed trajectory is to achieve 18 weeks by February 2020.

Paediatric Dietetics



Since 2017/2018 there has been no notable change in the numbers of new referral. The

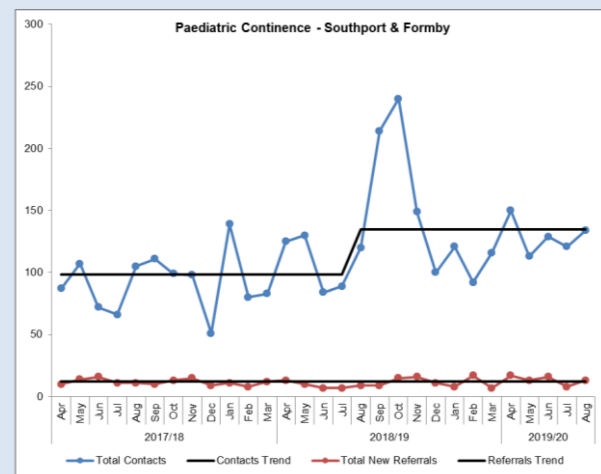
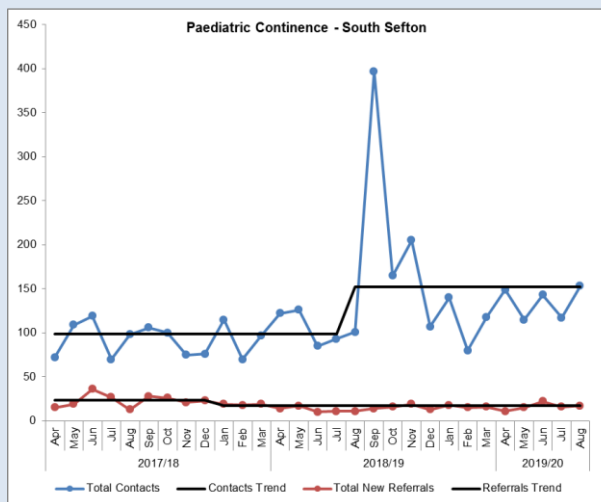
average wait to first contact being under 18 weeks. There has been an upward trend in terms of total contacts in the last 12 months reflecting increased investment in the service to address stability, quality and equity of access.

Dietetics DNAs & Cancellations

	13/14	14/15	15/16	16/17	17/18	18/19	19/20 YTD
Appointments	327	532	429	647	528	698	377
DNA	66	53	41	147	68	116	83
Provider Cancellations	6	0	5	29	0	44	25
Client Cancellations	27	63	63	207	128	184	116
DNA Rate	16.8	9.1	8.7	18.5	11.4	14.3	18.0
Provider Cancellations Rate	1.8	0.0	1.2	4.3	0.0	5.9	6.2
Client Cancellations Rate	7.3	10.6	12.8	24.2	19.5	20.9	23.5

The % of do not attend (DNAs) and patient cancelled appointments is higher than other community services and further investigation of appointment management will need to take place.

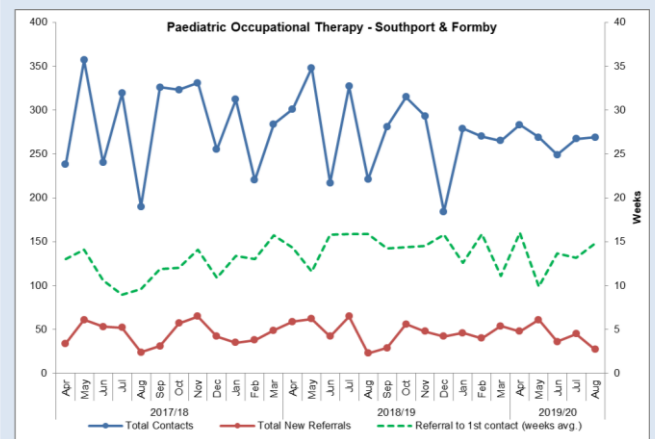
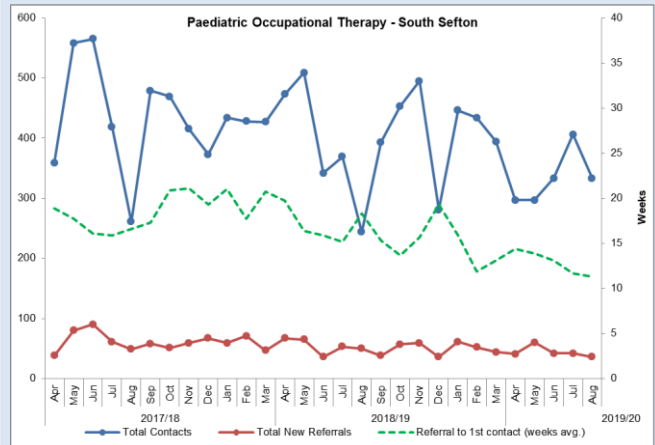
Paediatric Continence



There has been no significant change in demand in new referrals since 2017/18. There is a reported surge in total contact mid-2018, this is

being assigned to a data issue, as the pattern has not been repeated.

Occupational Therapy



There has been no significant change in demand – new referrals since 2017/18. Although referral to first contact has been generally less than 18 weeks, there is a trend of specific improvement in South Sefton.

Children’s Wheelchair Services

This is the percentage of children or young people who wait less than 18 weeks for a wheelchair (NHSE commission South Sefton activity).

Waiting Times			
Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
40.0%	57.1%	85.7%	100%

This indicate improved performance and current compliance in the timeliness of issuing wheelchairs.

Paediatric Community Audiology Services – Contacts and Average Waits

Data and information on this service was formally flowed to the CCG from 2019/2020.

South Sefton CCG

	Activity			Av Waiting Time (Weeks)
	New	Follow Up	Total	
Apr-19	25	25	50	21
May-19	25	21	46	18
Jun-19	22	16	38	18
Jul-19	18	14	32	19
Aug-19	18	21	39	18
Sep-19	23	15	38	19
Oct-19	12	18	30	18

Southport & Formby CCG

	Activity			Av Waiting Time (Weeks)
	New	Follow Up	Total	
Apr-19	42	23	65	26
May-19	33	26	59	25
Jun-19	25	42	67	23
Jul-19	49	38	87	22
Aug-19	33	17	50	22
Sep-19	45	20	65	23
Oct-19	28	26	54	23

The current information shows that waits for South Sefton are being managed at around 18 weeks. The service for Southport & Formby was transferred to Alder Hey in the previous year before which there was a gap in provision. This is reflected in the opening wait times, which although over 18 weeks are improving.

Child and Adolescent Mental Health Services

Access to Children & Young People’s Mental Health Services.

There are national targets for increasing how many children and young people are being supported by commissioned NHS community services (Access rates)

	17/18 (target 30%)	18/19 (target 32%)	% increase
South Sefton	23.2%	29.4%	26.7%
Southport & Formby	30.6%	38.1%	24.5%
Sefton-wide	26.9%	33.8%	25.5%

Across Sefton the access rates are exceeding the national target. However, there is a different rate of access between the two CCG areas with Southport & Formby having a notably higher access rate. The rates in South Sefton are improving at a higher rate. In response, increased levels of activity have been commissioned in South Sefton.

Eating Disorders – South Sefton CCG

Routine – 4 Week Wait (100%)

Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
100.0%	90.9%	92.3%	86.96%

Urgent – 1 Week Wait (100%)

Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
100.0%	80.0%	66.7%	50.0%

Eating Disorders – Southport & Formby CCG

Routine – 4 Week Wait (100%)

Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
84.0%	85.2%	84.0%	95.24%

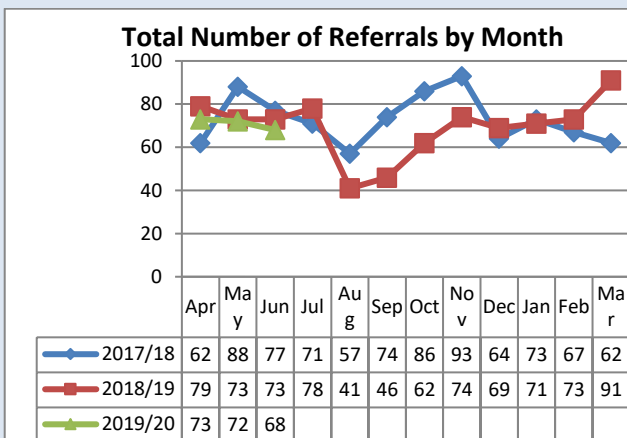
Urgent – 1 Week Wait (100%)

Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
66.7%	66.7%	50.0%	75%

Work is being under taken by the provider to reduce the number who do not attend (DNAs). The service works with small numbers and a single case can create a breach for this KPI, which is understood nationally. Activity commissioned on nationally indicated levels. The last year has seen activity levels exceed these levels by over 100%. Risk is being managed and is part of national reporting.

Nationally there has been a reported increase in demand for these services which is reflected in planned mental health investments flowing to CCGs for this purpose.

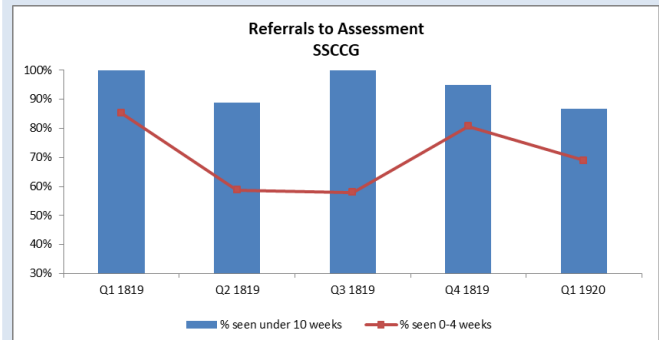
South Sefton CCG CAMHS Referrals



Outcome of Referral	% Of Total Referrals in Time Period				
	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
Declined	57.8%	43.6%	38.5%	41.7%	50.7%
Allocated	12.0%	38.2%	39.5%	33.2%	21.1%
Pending Action	30.2%	18.2%	22.0%	25.1%	28.2%
Total	100%	100%	100%	100%	100%

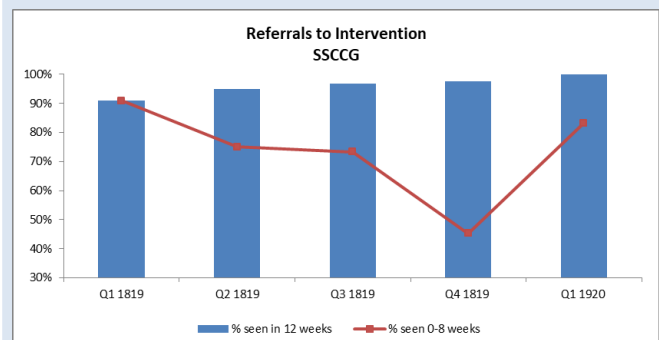
The proportion of referrals received by the service for South Sefton CCG; referrals that were declined has seen a slight decrease from 57.8% in quarter 1 2018/19, to 50.7% in quarter 1 2019/20. The proportion of referrals received that were accepted and allocated was higher in quarter 1 2019/20 (21.1%) compared to 12.0% in quarter 1 2018/19. Fluctuations across quarters have seen a larger proportion of referrals requiring some level of assessment or intervention.

Waiting Times - Referral to Assessment



The proportion of service users waiting less than 10 weeks from the point of referral to an assessment taking place has fluctuated between 87.0% in quarter 1 2019/20 to 100% in quarter 1 2018/19 and quarter 3 of 2018/19. There was a minimum of 58.0% of referrals waiting less than 4 weeks from their referral to assessment; this proportion was at its peak in quarter 1 2018/19 when 85.2% waited less than 4 weeks.

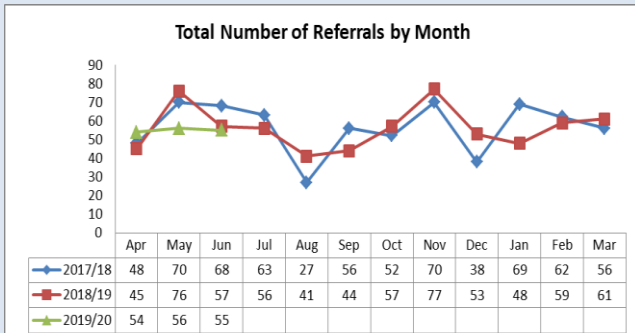
Waiting Times – Assessment to Intervention



The proportion of referrals where an intervention had taken place waiting less than 12 weeks from referral to intervention has increased slightly across each quarter from quarter 1 2018/19 to the first quarter of 2019/20. The proportion of referrals waiting less than 8 weeks from their referral to intervention has reduced across the quarters of 2018/19 although this increased again in the first quarter of 2019/20.

Southport & Formby CCG CAMHS Referrals

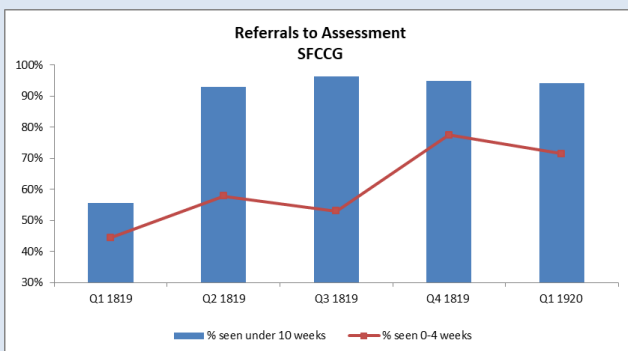
Referrals



Outcome of Referral	% Of Total Referrals in Time Period				
	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20
Declined	53.9%	41.1%	31.6%	48.2%	48.5%
Allocated	30.9%	40.4%	43.3%	28.0%	30.3%
Pending Action	15.2%	18.4%	25.1%	23.8%	21.2%
Total	100%	100%	100%	100%	100%

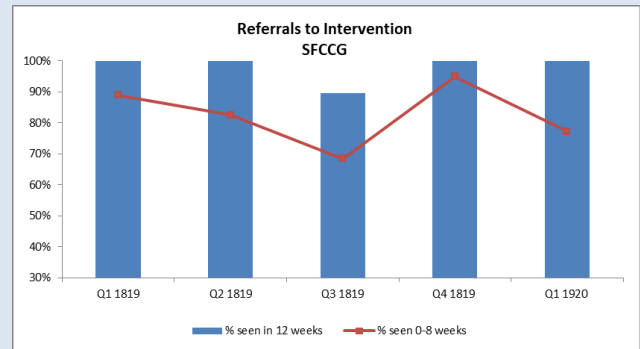
The proportion of referrals that were declined reduced from the first quarter of 2018/19 from 53.9% to 48.5% in the first quarter of 2019/20. The lowest proportion of referrals declined was during quarter two and three of 2018/19, during this period the proportion of referrals that were allocated and actioned was at its highest (40.4% and 43.3%). Fluctuations across quarters have seen a larger proportion of referrals requiring some level of assessment or intervention.

Waiting Times - Referral to Assessment



The proportion of referrals that waited under 4 weeks from their referral to assessment taking place has seen an upward trend throughout 2018/19. The proportion of referrals that waited under 10 weeks from referral to assessment saw an increase in quarter 2 2018/19 and has remained above 93% from this point onward.

Waiting Times – Assessment to Intervention



The proportion of referrals that waited less than 8 weeks from their referral to intervention decreased from quarter 1 to quarter 3 2018/19, but subsequently increased in quarter 4. In quarter 1 2019/20 77.3% of all referrals where an intervention took place waited less than 8 weeks from referral to intervention. Throughout 2018/19 and the first quarter of 2019/20, except for quarter 3, all referrals where an intervention has taken place occurred within 12 weeks from referral to intervention.

Although referral rates have not notably increased there has been an increased in the recorded access rates and a possible trend of larger numbers of cases requiring intervention and for longer. This indicates increased demand and pressure on this service.

Summary

The following points have been identified within the main body of this report and highlighted as area of opportunity for future partnership work, inform the Joint Commissioning Strategy for children and young people with special educational needs and/or disabilities (SEND) over the coming years.

- There are **59,066** children and young people in Sefton (age 0-19). Population projections suggest that generally over the next decade Sefton is likely to have a relatively stable younger population but an increasing number of 'older people.'
- **21%** of children and young people in Sefton are living in low income households and **17%** in poverty.
- **40,003** children and young people are educated in Sefton state-funded, maintained nursery, primary, secondary, special schools and pupil referral units (PRUs).
- In July 2019, the number of children and young people for whom the authority provides 'SEN support' in maintained schools had increased to **4,298** and the number of children and young people for whom Sefton maintains an EHC plan increased to **1,584**.
- The average percentage of children and young people receiving 'SEN support' in a Sefton school setting is **10.66%** of the maintained school cohort, compared to a national average of 11.7% and a Northwest average of 11.8%.
- The average percentage of children and young people for whom Sefton maintains an EHC Plan is **2.5%** compared to a national average of 2.9% and a Northwest average of 3%.
- **13.2%** of children in Sefton have an identified special educational need and/or disabilities, compared to an average of 14.6% across all English single tier and county councils and a northwest average of 14.8%.
- There are significantly more male than female children and young people for whom the local authority maintains and EHC Plan, with males accounting for over **74.3%** of the cohort.
- Children and young people aged 11-15yrs account for **40%** of the cohort with an EHC plan.
- Noticeably **10%** of EHC Plans are for young people aged 20-25yrs.
- 91% of the cohort with an EHC Plan are classified as 'white/British'.
- Only **4%** of the cohort with an EHC Plan have English as an additional language.
- In Sefton, only **25%** of children and young people with special educational needs and/or disabilities (SEND), for whom the local authority maintains an EHC plan, are integrating in mainstream school, significantly below the National 47.9%.
- The top 3 primary needs in primary schools are speech, language and communication needs, moderate learning difficulties, social, emotional and mental health needs.
- In secondary schools we see this change to specific learning difficulty (this is at **24.3%** compared to 20.7% nationally), moderate learning difficulty, and social, emotional or mental health needs.
- In our special schools the largest primary need is autism at **44.6%** compared to 28.2% nationally.
- Sefton has seen a considerable **47.3%** rise in number of children and young people with a Sefton maintained EHC plan over the five-year period 2014 – 2018.
- It is anticipated that the number of EHC plans issued in 2019 will increase significantly to approximately 338 plans, an estimated increase of **233%** on the 2018 figure of 145 plans.
- The percentage of new EHC plans issued within the statutory recommended 20-week period, for the three-year period 2014-2017 averaged of 90.8%, but dropped significantly in 2018 to 13.8%. It is very unlikely that the Council's overall performance for those EHC Plans being finalised within a 20-week period will exceed **30%**.
- The percentage of cases going to tribunal following mediation has fluctuated in Sefton, 33.3% in 2016 (compared to 24.9% Nationally)

went to tribunal, 44.4% in 2017 (nationally this was 25.3%) and 20% in 2018 (nationally 25.2%).

- The average local authority spend per week/per child for children in Sefton with an EHCP is significantly higher compared to the average for all English single tier and county councils and the Northwest average, suggesting that Sefton spent approximately **£3.3m** more over the typical 38-week academic year in 2017/18.
- Sefton's high needs funding is £15.76M and it is estimated that the growth in demand could be approximately **6%** (£936k) per annum.
- There are significant variances in the individual funding of the 158 students (aged 16-24yrs) who are educated at post-16 provision within and outside of the borough.
- The percentage of children receiving 'SEN support' at KS2 meeting expected standards in reading, writing and maths is moderately below national and statistical neighbour averages, although progress scores at KS2 are positive and above national and statistical neighbour averages. Those children with an EHC Plan at KS2 meeting expected standards in reading, writing and maths is significantly below national and statistical neighbour averages. The progress scored at KS2 are also below national and statistical neighbour averages.
- The Attainment 8 score for young people receiving 'SEN support' at KS4 is moderately below national and statistical neighbour averages. The Attainment 8 score for young people with an EHC Plan at KS4 is marginally better than national and statistical neighbour averages.
- Progress 8 scores for both young people receiving 'SEN support' and those with an EHC Plan at KS4 are broadly like their peers nationally, but below statistical neighbour averages.
- The percentage of KS4 SEN pupils with an EHCP going to, or remaining in education & employment/training overall is above national and statistical neighbour averages.
- In the last 4 years there has been a **160%** increase in demand for specialist transport

services for the 5-16yrs cohort. 848 children and young people (5-24yrs) receive specialist transport.

- **234** children and young people attend Aim Higher initiatives, with an average of 1,847 visits. However, **70%** of primary pupils who attended the Youth Participation Conferences stated they did not attend Aiming High activities with this rising to **83%** of the young people aged over 11.
- Children and young people with a special educational need and/or disabilities (SEND) who attended the Youth Participation Conferences still feel that they can meet friends in their local community, playing out in the street, in local parks, at youth groups such as Brownies and sporting activities, and on-line. However, the participants identified that they would like more sports clubs, youth clubs that they could just opt in to and out of without a referral form.
- Young people with special educational needs and/or a disabilities (SEND) have said that they would like further support in travel training, help with life skills and longer taster sessions in college.
- Young people with special educational needs and/or a disabilities (SEND) have said that barriers for them gaining employment include academic achievement, health needs and ability to travel independently.
- **40** young people currently make use of the Springbrook residential unit and on average a total of 871 nights stay is offered each year.
- Dietetics and Speech and Language (SALT) community health services are showing notable levels of increased activity in 2019/2020, however the increase is not sustained and the numbers waiting for a service remains considerably above the 18-week target for Sefton to 30 weeks +, with more than 50% now waiting more than 18 weeks.
- Since 2017/2018 there has been no notable change in the numbers of new referral for Paediatric Dietetics, with the average wait to first contact being under 18 weeks. However, the percentage of Do Not Attend (DNAs) and

patient cancelled appointments is higher than other community services.

- Across Sefton the access rates to Children & Young People's Mental Health Services are exceeding the national target, with a different rate of access between the two CCG areas with Southport & Formby having a notably higher access rate.

Data Appendix

Demographics

Population projections by the Office for National Statistics (ONS) suggest that generally over the next decade Sefton is likely to have a relatively stable younger population but an increasing number of ‘older people’. Figure 1 illustrates the current Sefton population pyramid with its ‘fat middle’. As those people in the current ages 45 to 69 get older they begin to get to an age where they are much more likely to require support from Adult Social Care. This trend of people requiring additional support is likely to last for 25 years or so.

Tables 3, 4, 5 & 6 shows the population projections to 2041. The 0-24yr age groups are going to remain relatively consistent. However, whilst the population projections suggest that the younger population will remain relatively stable this does not mean that there will not be an increased demand for services for younger people support in Adult Social Care. This is because once someone ‘ages out’ of the 0-17 cohort (0-25 SEND) and if they require ongoing support they are likely to stay with a service for a significant period. This cohort of clients with physical or learning difficulties are also living for longer periods. As a result, the continual ‘filing up’ from below means that we will need to be able to support an increased number of people in younger age groups ‘in total’ even though annual demand of those transitioning from 17 to 18 will remain relatively stable.

Table 1. Sefton 2018 Mid-year Population Estimates by 5-Year Age Groups

Age Ranges are Inclusive	Males	Females	Total
Early Years & Nursery (Aged 0-3)	5,800	5,500	11,300
Primary School Age (4-11)	12,900	12,100	25,000
Secondary School Age (12-16)	7,400	7,100	14,500
Aged 17-19	4,300	4,100	8,400
Aged 17-25	12,900	11,900	24,900

Table 2. Sefton 2018 Mid-year Population Estimates by 5-Year Age Groups

Age Group	Males	Females	Total	% of Total
0 - 4	7,400	7,000	14,400	5.2
5 - 9	8,100	7,500	15,600	5.7
10 - 14	7,700	7,300	14,900	5.4
15 - 19	7,200	6,900	14,200	5.2
20 - 24	7,000	6,500	13,500	4.9
25 - 29	8,100	7,800	15,900	5.8
30 - 34	7,400	7,900	15,300	5.6
35 - 39	7,100	7,700	14,800	5.4
40 - 44	6,800	7,600	14,400	5.2
45 - 49	8,700	9,500	18,300	6.6
50 - 54	9,800	10,700	20,500	7.4
55 - 59	10,100	10,800	20,900	7.6
60 - 64	8,900	9,800	18,700	6.8
65 - 69	8,100	8,600	16,700	6.1
70 - 74	7,600	8,600	16,200	5.9
75 - 79	5,300	6,700	12,000	4.4
80 - 84	4,100	5,800	9,900	3.6
85 - 89	2,200	3,800	6,000	2.2
90+	900	2,300	3,300	1.2
Total	132,500	142,900	275,400	

Rounded to nearest 100

Figure 1. Sefton Population Pyramid and 2041 Projections

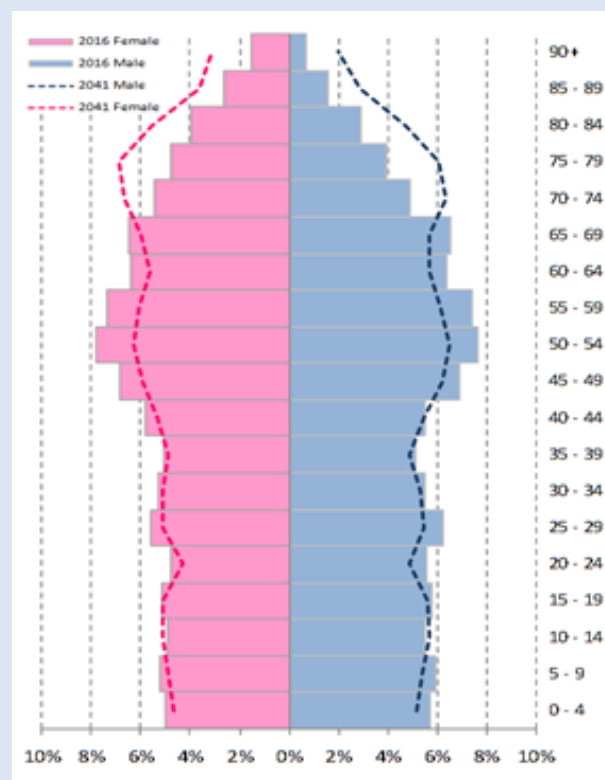


Table 3. Sefton 2016 Based Population Projections by 5-Year Age Groups

Age Group	2016	2020	2025	2030	2035	2040	2041
0-4	14,700	14,400	14,300	14,000	13,600	13,900	14,000
5-9	15,300	15,700	15,300	15,200	14,900	14,600	14,600
10-14	14,200	15,500	16,300	15,800	15,800	15,500	15,400
15-19	15,000	13,700	15,000	15,700	15,300	15,300	15,200
20-24	14,300	13,000	11,600	12,800	13,500	13,100	13,100
25-29	16,300	15,700	14,200	12,900	14,300	15,000	14,900
30-34	14,800	15,800	15,700	14,300	13,100	14,500	14,800
35-39	14,000	15,200	16,300	16,300	15,000	13,800	13,900
40-44	15,700	14,300	15,900	17,000	17,000	15,700	15,400
45-49	19,000	16,900	14,800	16,400	17,500	17,600	17,200
50-54	21,100	19,400	17,200	15,100	16,800	17,900	18,300
55-59	20,300	21,600	19,600	17,500	15,500	17,200	17,300
60-64	17,600	19,400	21,400	19,600	17,500	15,600	16,000
65-69	17,900	16,900	19,000	21,000	19,300	17,400	16,600
70-74	14,300	16,700	16,000	18,100	20,100	18,700	18,600
75-79	12,000	12,500	15,100	14,600	16,600	18,600	18,400
80-84	9,500	9,800	10,300	12,700	12,400	14,200	14,700
85-89	5,800	6,300	6,700	7,300	9,200	9,200	9,400
90+	3,100	3,500	4,100	4,700	5,500	7,100	7,300
All ages	274,900	276,100	278,600	280,900	282,900	284,700	285,000

Table 4. Sefton 2016 Based Population Projections by Child-level Age Cohorts

Age Ranges are Inclusive	2025	2030	2035	2040	% Change
Early Years & Nursery (Aged 0-3)	11,300	11,000	10,800	11,000	- 2.65
Primary School Age (4-11)	24,700	24,400	23,900	23,500	- 4.86
Secondary School Age (12-16)	16,300	16,100	16,000	15,800	- 3.07
Aged 17-19	8,600	9,100	8,800	8,900	3.49
Aged 17-25	22,800	24,600	25,300	24,900	9.21

Table 5. Sefton 2017 Based Small Area Population Estimates by 5-Year Age Groups

Ward	Total	Age Group						% 75+
		0-17	18-34	35-49	50-64	65-74	75+	
Ainsdale	12,700	2,200	1,800	2,000	2,700	2,000	1,900	15.0
Birkdale	12,900	2,800	2,400	2,400	2,800	1,400	1,100	8.5
Blundellsands	11,200	1,900	1,800	1,900	2,700	1,500	1,400	12.5
Cambridge	12,100	1,400	1,800	1,700	2,600	2,000	2,600	21.5
Church	11,900	2,200	2,600	2,300	2,700	1,200	900	7.6
Derby	12,600	2,900	2,800	2,300	2,600	1,200	900	7.1
Duke's	13,900	2,000	2,400	2,300	2,900	1,900	2,400	17.3
Ford	12,700	3,000	2,600	2,300	2,600	1,100	1,000	7.9
Harington	11,700	2,000	1,400	1,800	2,500	1,900	1,900	16.2
Kew	13,000	3,000	2,600	2,400	2,700	1,200	1,100	8.5
Linacre	13,100	3,100	3,300	2,400	2,500	1,100	700	5.3
Litherland	11,700	2,600	2,800	2,000	2,400	1,000	800	6.8
Manor	12,300	2,200	2,100	1,900	3,200	1,600	1,400	11.4
Meols	12,300	2,300	1,800	2,000	2,800	1,800	1,700	13.8
Molyneux	12,300	2,300	2,200	2,300	2,900	1,300	1,400	11.4
Netherton and Orrell	12,500	2,800	2,700	2,200	2,700	1,200	1,000	8.0
Norwood	15,100	3,600	3,100	3,000	3,100	1,400	1,000	6.6
Park	11,500	1,900	1,700	1,900	2,600	1,600	1,700	14.8
Ravenmeols	12,200	2,300	1,700	2,100	2,400	1,800	1,900	15.6
St Oswald	11,400	2,400	2,500	1,900	2,500	1,000	1,100	9.6
Sudell	12,200	2,900	2,000	2,000	2,700	1,700	1,800	14.8
Victoria	13,400	2,700	2,400	2,500	3,100	1,400	1,200	9.0

Table 6. Sefton 2017 Based Small Area Population Estimates by 5-Year Age Groups

Age Ranges are Inclusive	Early Years & Nursery (Aged 0-3)	Primary School Age (4-11)	Secondary School Age (12-16)	Aged 17-19	Aged 17-25	Total 0-25	% of Total Aged 0-25
Ainsdale	400	1,000	700	400	1,000	3,100	24.4
Birkdale	500	1,300	800	500	1,200	3,900	30.2
Blundellsands	400	900	500	300	900	2,700	24.2
Cambridge	300	700	400	200	900	2,200	18.2
Church	600	1,000	600	400	1,200	3,300	27.7
Derby	700	1,300	700	500	1,400	4,100	32.5
Duke's	500	800	500	300	1,100	3,000	21.6
Ford	700	1,400	800	400	1,300	4,100	32.3
Harington	300	1,000	700	400	900	2,800	23.9
Kew	600	1,400	800	400	1,200	4,000	30.8
Linacre	800	1,400	700	400	1,500	4,500	34.4
Litherland	700	1,200	600	400	1,300	3,800	32.6
Manor	400	1,000	600	400	1,100	3,100	25.2
Meols	400	1,000	700	400	1,000	3,100	25.1
Molyneux	500	1,100	700	400	1,100	3,300	26.8
Netherton and Orrell	600	1,200	800	400	1,300	3,900	31.2
Norwood	800	1,700	900	500	1,500	4,800	31.8
Park	400	900	500	300	1,000	2,700	23.5
Ravenmeols	400	1,000	700	400	900	3,000	24.7
St Oswald	500	1,100	600	400	1,200	3,500	30.6
Sudell	400	900	600	400	1,100	2,900	23.8
Victoria	600	1,300	800	400	1,200	3,800	28.4